# TITLE V BLOCK GRANT APPLICATION FORMS (2-21) STATE: MD

APPLICATION YEAR: 2010

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FORM 2									
MCH BUDGET		Y 2010							
[Secs. 504 (d) and 505(a)(3)(4)]  STATE: MD									
1. FEDERAL ALLOCATION									
(Item 15a of the Application Face Sheet [SF 424]) Of the Federal Allocation (1 above), the amount earmarked for:			\$	11,955,050					
A.Preventive and primary care for children:									
\$ 5,645,175 ( 47.22%)									
B.Children with special health care needs: \$ 4.584,762 ( 38.35%)									
(If either A or B is less than 30%, a waiver request must accompany the	e application)[Sec. 50	5(a)(3)]							
C.Title V admininstrative costs:									
\$ 344,305 ( 2.88%) (The above figure cannot be more than 10%)[Sec. 504(d)]									
2. UNOBLIGATED BALANCE (Item 15b of SF 424)			\$	0					
3. STATE MCH FUNDS (Item 15c of the SF 424)			\$	8,966,288					
4. LOCAL MCH FUNDS (Item 15d of SF 424)			\$	0					
5. OTHER FUNDS (Item 15e of SF 424)			\$	0					
			•	0					
6. PROGRAM INCOME (Item 15f of SF 424)	Ψ								
7. TOTAL STATE MATCH (Lines 3 through 6) (Below is your State's FY 1989 Maintainence of Effort Amount)	\$	8,966,288							
\$ 8,262,484									
8. FEDERAL-STATE TITLE V BLOCK GRAN (Total lines 1 through 6. Same as line 15g of SF 424)	T PARTNERS	HIP (SUBTOTAL)	\$	20,921,338					
9. OTHER FEDERAL FUNDS	(d. <del>T</del> 'd. )								
(Funds under the control of the person responsible for the administration	or the Title v program	224,511							
a. SPRANS: b. SSDI:	Ф <u> </u>								
	Ф <u> </u>	94,644							
c. CISS: d. Abstinence Education:	Ф <u>——</u>	0							
	Ψ <u>—</u>	0							
e. Healthy Start:  f. EMSC:	\$\$	0							
	\$ \$	96,900,831							
g. WIC: h. AIDS:	• • • • • • • • • • • • • • • • • • •	0							
i. CDC:	Ψ <u></u>	8,283,512							
j. Education:	Ψ <u></u>	0,200,012							
k. Other:	Ψ	<u> </u>							
FP/Injury	\$	5,632,822							
PCR/PHHS	\$	2,570,813							
10. OTHER FEDERAL FUNDS (SUBTOTAL of all Funds und	der item 9)		\$	113,707,133					
11. STATE MCH BUDGET TOTAL			\$	134,628,471					
(Partnership subtotal + Other Federal MCH Funds subtotal)			-						

#### FORM NOTES FOR FORM 2

None

#### FIELD LEVEL NOTES

1. Section Number: Form2\_Main
Field Name: OtherFedFundsOtherFund
Row Name: Other Federal Funds - Other Funds
Column Name:
Year: 2010
Field Note:
Additional other includes:
Injury - \$1,342,427
PHHS - \$1,869,562

#### STATE MCH FUNDING PROFILE

[Secs. 505(a) and 506((a)(I-3)]

STATE: MD

	FY 2	2005	FY 2	2006	FY 2	2007	
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED	
1. Federal Allocation (Line1, Form 2)	\$12,212,800	\$12,212,800	\$12,367,885	\$12,367,885	\$12,044,593	\$12,044,593	
2. Unobligated Balance (Line2, Form 2)	\$0	\$0	\$0	\$0	\$0	\$0	
3. State Funds (Line3, Form 2)	\$9,159,600	\$9,159,600	\$ 9,275,914	\$9,275,914	\$9,033,445	\$ 9,033,445	
4. Local MCH Funds (Line4, Form 2)	\$0	\$0	\$0	\$0	\$0	\$0	
5. Other Funds (Line5, Form 2)	\$0	\$0	\$0	\$0	\$0	\$0	
6. Program Income (Line6, Form 2)	\$0	\$0	\$0	\$0	\$0	\$0	
7. Subtotal (Line8, Form 2)	\$ 21,372,400	\$ 21,372,400	\$ 21,643,799	\$ 21,643,799	\$ 21,078,038	\$ 21,078,038	
		(THE FE	DERAL-STATE TITLE E	BLOCK GRANT PARTN	IERSHIP)		
8. Other Federal Funds (Line10, Form 2)	\$71,508,024	\$	\$ 82,058,987	\$ 82,058,987	\$ 79,453,751	\$ 79,453,751	
9. Total (Line11, Form 2)	\$ 92,880,424	\$ 92,880,424	\$ 103,702,786	\$ 103,702,786	\$ 100,531,789	\$ 100,531,789	
		·	(STATE MCH B	UDGET TOTAL)			

#### STATE MCH FUNDING PROFILE

[Secs. 505(a) and 506((a)(I-3)]

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	FY 2	2008	FY 2	2009	FY :	2010		
	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED		
1. Federal Allocation (Line1, Form 2)	\$12,045,757	\$12,045,757	\$11,931,558	\$	\$11,955,050	\$		
2. Unobligated Balance (Line2, Form 2)	\$0	\$0	\$0	\$	\$0	\$		
3. State Funds (Line3, Form 2)	\$9,307,147	\$9,307,147	\$ 8,948,669	\$	\$8,966,288	\$		
4. Local MCH Funds (Line4, Form 2)	\$0	\$0	\$0	\$	\$0	\$		
5. Other Funds (Line5, Form 2)	\$0	\$0	\$0	\$	\$0	\$		
6. Program Income (Line6, Form 2)	\$0	\$0	\$0	\$	\$0	\$		
7. Subtotal (Line8, Form 2)	\$	\$21,352,904	\$20,880,227	\$0	\$ 20,921,338	\$0		
		(THE FE	DERAL-STATE TITLE E	BLOCK GRANT PARTN	IERSHIP)			
8. Other Federal Funds (Line10, Form 2)	\$86,003,388	\$86,003,388	\$105,935,463	\$	\$113,707,133	\$		
9. Total (Line11, Form 2)	\$107,356,292	\$107,356,292	\$126,815,690	\$0	\$134,628,471	\$0		
	(STATE MCH BUDGET TOTAL)							

FORM NOTES FOR FORM 3
None

FIELD LEVEL NOTES

None

#### BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: MD

	FY	2005	FY:	2006	FY 2007		
I. Federal-State MCH Block Grant Partnership	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED	
a. Pregnant Women	\$\$	4,025,872	\$4,021,441	\$4,021,441	\$3,927,537	\$ 3,927,537	
b. Infants < 1 year old	\$	\$ 2,369,404	\$2,362,505	\$	\$3,546,528	\$ 3,546,528	
c. Children 1 to 22 years old	\$8,144,054	\$ 8,144,054	\$8,018,167	\$8,018,167	\$7,579,061	\$	
d. Children with Special Healthcare Needs	\$5,285,211	\$ 5,285,211	\$ 5,554,945	\$5,554,945	\$ 4,240,450	\$4,240,450	
e. Others	\$	\$ 0	\$0	\$0	\$0	\$0	
f. Administration	\$1,547,859	\$ 1,547,859	\$1,686,741	\$1,686,741	\$1,784,462	\$1,784,462	
g. SUBTOTAL	\$ 21,372,400	\$21,372,400	\$21,643,799	\$21,643,799	\$21,078,038	\$21,078,038	
II. Other Federal Funds (under the	control of the person	responsible for admini	istration of the Title V	program).			
a. SPRANS	\$ 359,565	]	\$349,977		\$ 207,111		
b. SSDI	\$ 100,000	]	\$100,000		\$100,000		
c. CISS	\$0	1	\$ 100,000		\$ 100,000		
d. Abstinence Education	\$ 535,590	]	\$569,675		\$ 557,334		
e. Healthy Start	\$0	]	\$0		\$0		
f. EMSC	\$0	]	\$0		\$0		
g. WIC	\$ 56,001,230	]	\$64,679,781		\$62,560,023		
h. AIDS	\$0	]	\$0		\$0		
i. CDC	\$6,888,317	]	\$8,224,076		\$8,321,025		
j. Education	\$0	]	\$0		\$0		
k.Other	]	_					
Family Planning	\$ 3,510,017		\$ 3,956,186		\$ 3,591,085		
Injury	\$ 381,603		\$ 1,188,131		\$ 1,250,745		
Preventive Health BG	\$0		\$ 2,299,500		\$ 2,208,498		
Primary Care/Rural H	\$0		\$0		\$ 557,930		
Primary Care	\$0	]	\$ 591,661		\$0		
Preventive Hlth BG	\$3,226,326		\$0		\$0		
Primary Care	\$ 505,376	]	\$0		\$0		
III. SUBTOTAL	\$ 71,508,024	]	\$ 82,058,987		\$ 79,453,751		

#### BUDGET DETAILS BY TYPES OF INDIVIDUALS SERVED (I) AND SOURCES OF OTHER FEDERAL FUNDS (II)

[Secs 506(2)(2)(iv)]

STATE: MD

	F	Y 2008	FY	2009	FY	FY 2010		
I. Federal-State MCH Block Grant Partnership	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED		
a. Pregnant Women	\$ 2,571,1	59 \$ 2,571,159	\$ 2,456,960	\$	\$ 2,971,107	\$		
b. Infants < 1 year old	\$	35 \$ 2,868,135	\$ 2,868,135	\$	\$\$2,830,478	\$		
c. Children 1 to 22 years old	\$ 9,346,1	9,346,107	\$ 8,987,629	\$	\$ 8,936,427	\$		
d. Children with Special Healthcare Needs	\$5,594,0	\$ 5,594,080	\$ 5,594,080	\$	\$ 5,805,320	\$		
e. Others	\$ 629,6	\$ 629,637	\$ 629,637	\$	\$0	\$		
f. Administration	\$ 343,7	343,786	\$ 343,786	\$	\$ 378,006	\$		
g. SUBTOTAL	\$ 21,352,904	\$21,352,904	\$20,880,227	\$0	\$ 20,921,338	\$0		
II. Other Federal Funds (under the	control of the perso	on responsible for admin	istration of the Title V	program).		1		
a. SPRANS	\$ 100,000	<u>_</u>	\$ 289,172		\$ 224,511			
b. SSDI	\$ 100,000	<u> </u>	\$94,644	_	\$ 94,644			
c. CISS	\$ 143,489		\$0		\$0			
d. Abstinence Education	\$557,798		\$ 569,676		\$0			
e. Healthy Start	\$0		\$0	]	\$0	]		
f. EMSC	\$0		\$0	]	\$0			
g. WIC	\$ 68,516,641		\$88,576,661_	]	\$96,900,831	]		
h. AIDS	\$0		\$0	]	\$0	]		
i. CDC	\$ 8,427,999		\$8,298,035	]	\$8,283,512	]		
j. Education	\$0		\$0	]	\$0	]		
k.Other		<u> </u>		_		-		
FP/Injury	\$0		\$0		\$ 5,632,822			
PCR/PHHS	\$0		\$0		\$ 2,570,813			
Family Planning	\$ 4,080,909		\$ 3,991,508		\$0			
Injury	\$1,490,197		\$1,467,042		\$0			
Preventive Health BG	\$0		\$1,985,279		\$0			
Primary Care/Rural H	\$ 575,057		\$663,446		\$0			
Preventive Heath BG	\$ 2,011,298		\$0		\$0			
III. SUBTOTAL	\$ 86,003,388		\$ 105,935,463	Ī	\$ 113,707,133	Ī		

FORM NOTES FOR FORM 4
None

FIELD LEVEL NOTES

None

#### STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

STATE: MD

Type of Sepvice	FY 2	2005	FY 2	2006	FY 2007		
TYPE OF SERVICE	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED	
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$ 2,085,954	\$	\$	\$	\$	\$	
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$	\$	\$7,883,545	\$	\$	\$7,883,545	
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$ 2,708,803	\$	\$\$	\$ 2,328,263	\$ 2,328,263	\$ 2,328,263	
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$8,650,200	\$8,650,200	\$9,317,651	\$9,317,651	\$8,751,890	\$8,751,890	
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$21,372,400	\$21,372,400	\$21,643,799	\$21,643,799	\$21,078,038	\$21,078,038	

#### STATE TITLE V PROGRAM BUDGET AND EXPENDITURES BY TYPES OF SERVICES

[Secs. 505(a)(2)(A-B) and 506(a)(1)(A-D)]

STATE: MD

TYPE OF SERVICE	FY 2	2008	FY 2	2009	FY 2010		
THE OF SERVICE	BUDGETED	EXPENDED	BUDGETED	EXPENDED	BUDGETED	EXPENDED	
I. Direct Health Care Services (Basic Health Services and Health Services for CSHCN.)	\$1,697,710	\$1,697,710	\$1,583,511	\$	\$1,571,270	\$	
II. Enabling Services (Transportation, Translation, Outreach, Respite Care, Health Education, Family Support Services, Purchase of Health Insurance, Case Management, and Coordination with Medicaid, WIC, and Education.)	\$8,190,711	\$8,190,711	\$7,832,233	\$	\$6,524,185	\$	
III. Population-Based Services (Newborn Screening, Lead Screening, Immunization, Sudden Infant Death Syndrome Counseling, Oral Health, Injury Prevention, Nutrition, and Outreach/Public Education.)	\$	\$3,492,527	\$	\$	\$4,862,982	\$	
IV. Infrastructure Building Services (Needs Assessment, Evaluation, Planning, Policy Development, Coordination, Quality Assurance, Standards Development, Monitoring, Training, Applied Research, Systems of Care, and Information Systems.)	\$	\$	\$	\$	\$7,962,901	\$	
V. Federal-State Title V Block Grant Partnership Total (Federal-State Partnership only. Item 15g of SF 42r. For the "Budget" columns this is the same figure that appears in Line 8, Form 2, and in the "Budgeted" columns of Line 7 Form 3. For the "Expended" columns this is the same figure that appears in the "Expended" columns of Line 7, Form 3.)	\$21,352,904	\$21,352,904	\$20,880,227	\$0	\$20,921,338	\$	

FORM NOTES FOR FORM 5
None

FIELD LEVEL NOTES

None

	FORM 6										
NUMBER AND PERCENTAGE OF NEWBORNS AND OTHERS SCREENED, CASES CONFIRMED, AND TREATED											
Sect. 506(a)(2)(B)(iii)											
STATE: MD											
Total Births by Occurrence: 74,601 Reporting Year: 2008											
Type of Screening Tests	(A Receiving at lea (1	st one Screen	(B) No. of Presumptive Positive	(C) No. Confirmed	(D Needing Treated Tre	atment that					
	No.	%	Screens	Cases (2)	No.	%					
Phenylketonuria	76,900	103.1	11	2	2	100					
Congenital Hypothyroidism	76,900	103.1	57	28	28	100					
Galactosemia	76,900	103.1	23	3	3	100					
Sickle Cell Disease	76,900	103.1	104	103	103	100					
Other Screening	(Specify)										
Biotinidase Deficiency	76,900	103.1	10	1	1	100					
Cystic Fibrosis	76,900	103.1	39	10	10	100					
Homocystinuria	76,900	103.1	43	0	0						
Maple Syrup Urine Disease	76,900	103.1	21	1	1	100					
Other	76,900	103.1	30	5	5	100					
Tyrosinemia Type I	76,900	103.1	21	1	1	100					
Very Long-Chain Acyl-CoA Dehydrogenase Deficiency	76,900	103.1	12	2	2	100					
Citrullinemia	76,900	103.1	2	2	2	100					
Isovaleric Acidemia	76,900	103.1	5	1	1	100					
Propionic Acidemia	76,900	103.1	37	2	2	100					
3-Methylcrotonyl- CoA Carboxylase Deficiency	76,900	103.1	14	2	2	100					
Glutaric Acidemia Type I	76,900	103.1	15	1	1	100					
21-Hydroxylase Deficient Congenital Adrenal Hyperplasia	76,900	103.1	54	2	2	100					
Medium-Chain Acyl-CoA Dehydrogenase Deficiency	76,900	103.1	5	3	3	100					
Screening Progra			n (Specify Tests	by name)							
(1) Use occurrent (2) Report only the (3) Use number of	se from resident l	births.									

#### FORM NOTES FOR FORM 6

There were 2 labs competing to do newborn screening in Maryland in 2008: the State Lab and Pediatrix (now Perkin-Elmer Genetics), a commercial lab. There were 68,870 babies screened by the State Lab: 53,872 were screened as newborns and 14,998 were screened for the first time as subsequent samples, collected at more than a week of age. (Maryland has a 2 specimen system.) There were 24,029 babies screened by Pediatrix; 23,028 babies were screened as newborns and 1,001 were screened as subsequents. It should be noted that many babies have one specimen sent to the State lab and one sent to Pediatrix so there are many duplicates and that complete deduplication is not possible with current IT resources. The number of initial screens was, as best we can tell, 76,900. (53,872 from the State Public Health Lab and 23,028 from Pediatrix.) This is the best estimate of the number of infants served by the newborn screening program (76,900). Maryland always screens more infants than were born to Maryland residents because there are always over 3,000 babies born in Maryland to residents of other jurisdictions. In addition there are approximately 7,000 babies born each year to Maryland residents outside the State, most in Washington, DC. We receive many subsequent specimens on the out of State resident births. Provisional data from Maryland vital statistics shows that there were 74,601 births in Maryland in CY 2008, 70,926 to Maryland residents and 3,675 to out of state residents. - This is our best estimate of births by occurrence. NBS data is given in calendar year to be consistent with the National Newborn Screening and Genetics Resource Center data.

The number of presumptive positives has been refined to remove results that while not normal are clearly the result of common artifacts (age, diet, TPN, medications). "Presumptive positives" are a smaller number than all "not normal" results for a given analyte. Maryland screens for all the disorders recommended by the ACMG, the AAP and the March of Dimes including the secondary targets.

#### FIELD LEVEL NOTES

Section Number: Form6\_Main
 Field Name: BirthOccurence
 Row Name: Total Births By Occurence

Column Name: Total Births By Occurence

Year: 2010 Field Note:

There were 74,601 Maryland recorded births for CY 2008. (CY 2008: 70,926 to Maryland residents and 3,675 to non- residents). There were 6,841 out of state births to Maryland residents for CY 2007. These numbers are provisional from Maryland Vital Statistics. The number of births to Maryland residents, regardless of place of occurrence is not yet available but there are usually 7,000 to 8,000 additional births to Maryland residents taking place out side the state- most in Washington, DC

Data for newborn screening is given by CY to be consistent with the data reported to the National Newborn Screening and Genetics Resource Center (NNGRC).

2. Section Number: Form6\_Main

Field Name: Phenylketonuria\_OneScreenNo

Row Name: Phenylketonuria

Column Name: Receiving at least one screen

Year: 2010 Field Note:

There were 2 labs competing to do newborn screening in Maryland in 2008: the State Lab and Pediatrix (now Perkin-Elmer Genetics), a commercial lab. There were 68,870 babies screened by the State Lab: 53,872 were screened as newborns and 14,998 were screened for the first time as subsequent samples, collected at more than a week of age. (Maryland has a 2 specimen system.) There were 24,029 babies screened by Pediatrix; 23,028 babies were screened as newborns and 1,001 were screened as subsequents. It should be noted that many babies have one specimen sent to the State lab and one sent to Pediatrix so there are many duplicates and that complete deduplication is not possible with current IT resources. The number of initial screens was, as best we can tell, 76,900. (53,872 from the State Public Health Lab and 23,028 from Pediatrix.) This is the best estimate of the number of infants served by the newborn screening program (76,900). Maryland always screens more infants than were born to Maryland residents in Maryland because there are always over 3,000 babies born in Maryland to residents of other jurisdictions. In addition there are approximately 7,000 babies born each year to Maryland residents outside the State, most in Washington, DC. We receive many subsequent specimens on the out of State resident births. Recently, we have noted a trend in that pediatricians are seeing many babies in the first week of life for monitoring of breast feeding and hyperbilirubinemia. The AAP now recommends a visit at 5-7 days. If the baby was born out of state, many pediatricians will send a specimen at that visit, because it is much easier than obtaining results from the jurisdiction of birth. Since the baby is less than 7 days old, that specimen is considered an initial specimen. Such specimens contribute to screening more babies than are born in Maryland. Provisional data from Maryland vital statistics shows that there were 74,601 births in Maryland in CY 2008, 70,926 to Maryland residents and 3,675 to out of state residents. -

3. Section Number: Form6\_Main Field Name: Congenital\_OneScreenNo

Row Name: Congenital

Column Name: Receiving at least one screen

Year: 2010 Field Note:

There were 2 labs competing to do newborn screening in Maryland in 2008: the State Lab and Pediatrix (now Perkin-Elmer Genetics), a commercial lab. There were 68,870 babies screened by the State Lab: 53,872 were screened as newborns and 14,998 were screened for the first time as subsequent samples, collected at more than a week of age. (Maryland has a 2 specimen system.) There were 24,029 babies screened by Pediatrix; 23,028 babies were screened as newborns and 1,001 were screened as subsequents. It should be noted that many babies have one specimen sent to the State lab and one sent to Pediatrix so there are many duplicates and that complete deduplication is not possible with current IT resources. The number of initial screens was, as best we can tell, 76,900. (53,872 from the State Public Health Lab and 23,028 from Pediatrix.) This is the best estimate of the number of infants served by the newborn screening program (76,900). Maryland always screens more infants than were born to Maryland residents in Maryland because there are always over 3,000 babies born in Maryland to residents of other jurisdictions. In addition there are approximately 7,000 babies born each year to Maryland residents outside the State, most in Washington, DC. We receive many subsequent specimens on the out of State resident births. Recently, we have noted a trend in that pediatricians are seeing many babies in the first week of life for monitoring of breast feeding and hyperbilirubinemia. The AAP now recommends at visit a 5-7 days. If the baby was born out of state, many pediatricians will send a specimen at that visit, because it is much easier than obtaining results from the jurisdiction of birth. Since the baby is less than 7 days old, that specimen is considered an initial specimen. Such specimens contribute to screening more babies than are born in Maryland. Provisional data from Maryland vital statistics shows that there were 74,601 births in Maryland in CY 2008, 70,926 to Maryland residents and 3,675 to out of state residents. -

Maryland screens for all the disorders recommended by the ACMG, the AAP and the March of Dimes including the secondary targets.

4. Section Number: Form6\_Main

Field Name: Galactosemia\_OneScreenNo

Row Name: Galactosemia

Column Name: Receiving at least one screen

Year: 2010 Field Note:

There were 2 labs competing to do newborn screening in Maryland in 2008: the State Lab and Pediatrix (now Perkin-Elmer Genetics), a commercial lab. There were 68,870 babies screened by the State Lab: 53,872 were screened as newborns and 14,998 were screened for the first time as subsequent samples, collected at more than a week of age. (Maryland has a 2 specimen system.) There were 24,029 babies screened by Pediatrix; 23,028 babies were screened as newborns and 1,001 were screened as subsequents. It should be noted that many babies have one specimen sent to the State lab and one sent to Pediatrix so there are many duplicates and that complete deduplication is not possible with current IT resources. The number of initial screens was, as best we can tell, 76,900. (53,872 from the State Public Health Lab and 23,028 from Pediatrix.) This is the best estimate of the number of infants served by the newborn screening program (76,900). Maryland always screens more infants than were born to Maryland residents in Maryland because there are always over 3,000 babies born in Maryland to residents of other jurisdictions. In addition there are approximately 7,000 babies born each year to Maryland residents outside the State, most in Washington, DC. We receive many subsequent specimens on the out of State resident births. Recently, we have noted a trend in that pediatricians are seeing many babies in the first week of life for monitoring of breast feeding and hyperbilirubinemia. The AAP now recommends a visit at 5-7 days. If the baby was born out of state, many pediatricians will send a specimen at that visit, because it is much easier than obtaining results from the jurisdiction of birth. Since the baby is less than 7 days old, that specimen is considered an initial specimen. Such specimens contribute to screening more babies than are born in Maryland. Provisional data from Maryland vital statistics shows that there were 74,601 births in Maryland in CY 2008, 70,926 to Maryland residents and 3,675 to out of state residents. -

Genetics Resource Center data.

Maryland screens for all the disorders recommended by the ACMG, the AAP and the March of Dimes including the secondary targets.

Section Number: Form6 Main

Field Name: SickleCellDisease\_OneScreenNo Row Name: SickleCellDisease

Column Name: Receiving at least one screen

Year: 2010 Field Note:

There were 2 labs competing to do newborn screening in Maryland in 2008: the State Lab and Pediatrix (now Perkin-Elmer Genetics), a commercial lab. There were 68,870 babies screened by the State Lab: 53,872 were screened as newborns and 14,998 were screened for the first time as subsequent samples, collected at more than a week of age. (Maryland has a 2 specimen system.) There were 24,029 babies screened by Pediatrix; 23,028 babies were screened as newborns and 1,001 were screened as subsequents. It should be noted that many babies have one specimen sent to the State lab and one sent to Pediatrix so there are many duplicates and that complete deduplication is not possible with current IT resources. The number of initial screens was, as best we can tell, 76,900. (53,872 from the State Public Health Lab and 23,028 from Pediatrix.) This is the best estimate of the number of infants served by the newborn screening program (76,900). Maryland always screens more infants than were born to Maryland residents in Maryland because there are always over 3,000 babies born in Maryland to residents of other jurisdictions. In addition there are approximately 7,000 babies born each year to Maryland residents outside the State, most in Washington, DC. We receive many subsequent specimens on the out of State resident births. Recently, we have noted a trend in that pediatricians are seeing many babies in the first week of life for monitoring of breast feeding and hyperbilirubinemia. The AAP now recommends a visit at 5-7 days. If the baby was born out of state, many pediatricians will send a specimen at that visit, because it is much easier than obtaining results from the jurisdiction of birth. Since the baby is less than 7 days old, that specimen is considered an initial specimen. Such specimens contribute to screening more babies than are born in Maryland. Provisional data from Maryland vital statistics shows that there were 74,601 births in Maryland in CY 2008, 70,926 to Maryland residents and 3,675 to out of state residents. -

Maryland screens for all the disorders recommended by the ACMG, the AAP and the March of Dimes including the secondary targets.

6. Section Number: Form6\_Main

Field Name: Phenylketonuria\_Presumptive

Row Name: Phenylketonuria

Column Name: Presumptive positive screens

Year: 2010 Field Note:

The number of presumptive positives has been refined to remove results that while not normal are clearly the result of common artifacts (age, diet, TPN, medications). "Presumptive positives" are a smaller number than all "not normal" results for a given analyte. Maryland screens for all the disorders recommended by the ACMG, the AAP and the March of Dimes including the secondary targets.

All presumptive positives are from the State Lab. Pediatrix uses different lab methods for some tests and does not break its data down in a way that it can be easily meshed with the State Lab data- So the presumptive positives are only those from the State Lab but the cases include thoses identified in both labs.

7. Section Number: Form6\_Main

Field Name: Congenital\_Presumptive Row Name: Congenital

Column Name: Presumptive positive screens

Year: 2010 Field Note:

The number of presumptive positives has been refined to remove results that while not normal are clearly the result of common artifacts (age, diet, TPN, medications). "Presumptive positives" are a smaller number than all "not normal" results for a given analyte. Maryland screens for all the disorders recommended by the ACMG, the AAP and the March of Dimes including the secondary targets.

All presumptive positives are from the State Lab.Pediatrix uses different lab methods for some tests and does not break its data down in a way that it can be easily meshed with the State Lab data- So the presumptive positives are only those from the State Lab but the cases include thoses identified in both labs.

8. Section Number: Form6\_Main

Field Name: Galactosemia\_Presumptive

Row Name: Galactosemia

Column Name: Presumptive positive screens

Year: 2010 Field Note:

The number of presumptive positives has been refined to remove results that while not normal are clearly the result of common artifacts (age, diet, TPN, medications). "Presumptive positives" are a smaller number than all "not normal" results for a given analyte. Maryland screens for all the disorders recommended by the ACMG, the AAP and the March of Dimes including the secondary targets.

All presumptive positives are from the State Lab.Pediatrix uses different lab methods for some tests and does not break its data down in a way that it can be easily meshed with the State Lab data- So the presumptive positives are only those from the State Lab but the cases include thoses identified in both labs.

9. Section Number: Form6\_Main

Field Name: SickleCellDisease\_Presumptive Row Name: SickleCellDisease Column Name: Presumptive positive screens

Year: 2010 Field Note:

The number of presumptive positives has been refined to remove results that while not normal are clearly the result of common artifacts (age, diet, TPN, medications). "Presumptive positives" are a smaller number than all "not normal" results for a given analyte. Maryland screens for all the disorders recommended by the ACMG, the AAP and the March of Dimes including the secondary targets.

All presumptive positives are from the State Lab.Pediatrix uses different lab methods for some tests and does not break its data down in a way that it can be easily meshed with the State Lab data- So the presumptive positives are only those from the State Lab but the cases include thoses identified in both labs.

10. Section Number: Form6\_Main

Field Name: Phenylketonuria\_Confirmed

Row Name: Phenylketonuria Column Name: Confirmed Cases

Year: 2010 Field Note:

In addition to the 2 classical PKU cases, there were 3 cases of significant hyperphe and 2 cases of non- clinically significant hyperphe.

11. Section Number: Form6\_Main

Field Name: Congenital\_Confirmed

Row Name: Congenital

Column Name: Confirmed Cases

Year: 2010

Field Note:

In addition to the 28 cases of classical congenital hypothyroidism, there were 3 cases of secondary hypothyroidism and 17 cases of other hypothyroidism.

Section Number: Form6\_Main Field Name: Galactosemia\_Confirmed

Row Name: Galactosemia Column Name: Confirmed Cases

Year: 2010 Field Note:

In addition to the 3 classical cases of GALT deficiency, there were 2 casesof epimerase deficiency and 1 case of variant galactosemia.

13. Section Number: Form6\_Main

Field Name: SickleCellDisease\_Confirmed

Row Name: SickleCellDisease Column Name: Confirmed Cases

Year: 2010 Field Note:

This number includes cases for whom we do not have what we consider to be gold standard defitintive diagnostic information (Electrophoresis at > 3 months of age and/or DNA and clinical evaluation by a pediatric hematologist.) However these cases have had 2 or 3 dried bloodspot samples analyzed by IEF and HPLC showing SCD as well as a clinical evaluation by a pediatric hematologist that resulted in the baby being put on appropriate treatment. The 103 cases include 58 SS, 36 SC and 9 Sbeta+ thalassemia. Complete definitive diagnostic information is available for only 38 (20 SS, 9 SC, and 9 Sbeta+ thalassemia). Some of the difficulty in getting the definitive information is a result of the (incorrect) interpretation of HIPPA by one center, now refusing to provide this information. Another issue is the reluctance of insurers to approve further studies, especially DNA.

14. Section Number: Form6\_Other Screening Types

Field Name: Other Row Name: All Rows Column Name: All Columns

Year: 2010 Field Note:

Other is Short Chain AcylCoA Dehydrogenase Deficiency (SCAD) In addition to the classical CF cases there were2 non-classical cases.

15. Section Number: Form6\_Screening Programs for Older Children and Women

Field Name: OtherWomen Row Name: All Rows Column Name: All Columns

Year: 2010 Field Note:

We continue to be unable to fit our other screening into your format. Details follow:

Hemoglobinopathy Carrier Screening was provided to 4,786 adults and older children in CY2008. The results go back to the primary care provider who submitted the sample. The hemoglobinopathy screening is primarily to identify carriers. (40 B thalassemia carriers, 59 AC, 237AS, and 63 other trait states were identified) They do not need treatment but all are offered genetic counseling. A list of places to receive counseling is provided. We have no way of tracking uptake.

AFP/Quadruple Marker Screening was provided for 159 low income women in CY 2008. We do not provide follow up for AFP/ Quadruple Marker Screening beyond notifying the patient's physician. The patients with abnormal AFP results are offered counseling and further work up is available at the University of Maryland. However, most OB providers prefer to handle the case themselves from this point on. We have no way of knowing the outcomes of these pregnancies.

Maternal PKU Screening was provided to 119 women. There were no positives.

In CY 2008 long term dietary management was provided to 354i ndividuals with metabolic disorders and these individuals receive blood level monitoring but we do not have a record of how many tests were provided.

### Number of Individuals Served (Unduplicated) under Title V (BY Class of Individuals and Percent of Health Coverage)

[Sec. 506(a)(2)(A)(i-ii)]

STATE: MD

Reporting Year: 2008

	TITLE V	PRIMARY SOURCES OF COVERAGE							
Types of Individuals Served	(A) Total Served	(B) Title XIX %	(C) Title XXI %	(D) Private/Other %	(E) None %	(F) Unknown %			
Pregnant Women	77,252	48.0	1.0	49.0	2.0	0.0			
Infants < 1 year old	75,362	49.0	2.0	0.0	0.0	0.0			
Children 1 to 22 years old	1,656,916	28.0	10.0	52.0	10.0	0.0			
Children with Special Healthcare Needs	11,968	44.4	0.0	52.4	3.2	0.0			
Others	7,830	7.0	0.0	76.0	17.0	0.0			
TOTAL	1,829,328								

#### FORM NOTES FOR FORM 7

None

#### FIELD LEVEL NOTES

 Section Number: Form7\_Main Field Name: PregWomen\_TS Row Name: Pregnant Women Column Name: Title V Total Served

Year: 2010

Field Note:

Based on # of live births in 2008, preliminary data from Vital Statistics Preliminary Report 2008

. Section Number: Form7\_Main Field Name: PregWomen\_XIX Row Name: Pregnant Women Column Name: Title XIX %

Year: 2010 Field Note:

Based on the number of pregnant women enrolled in Medicaid for FFY 2008. Data Source: MD Medicaid.

3. Section Number: Form7\_Main Field Name: PregWomen\_XXI Row Name: Pregnant Women Column Name: Title XXI %

Year: 2010 Field Note:

Based on the number of pregnant women enrolled in MCHP or MCHP Premium for FFY 2008. Data Source: MD Medicaid.

4. Section Number: Form7\_Main Field Name: PregWomen\_Private Row Name: Pregnant Women Column Name: Private/Other %

Year: 2010 Field Note:

Based on the number of deliveries at MD hospitals which were paid for by private and other insurers for 2007. Data Source: MD HSCRC Hospital Discharge Data, 2007.

 Section Number: Form7\_Main Field Name: PregWomen\_None Row Name: Pregnant Women Column Name: None %

Year: 2010 Field Note:

Based on the number of deliveries at MD hospitals which were paid for by self-pay for 2007. Data Source: MD HSCRC Hospital Discharge Data, 2007.

6. Section Number: Form7\_Main Field Name: Children\_0\_1\_TS Row Name: Infants <1 year of age Column Name: Title V Total Served

Year: 2010 Field Note:

Based on MD residents <1 yr old, Maryland Department of Planning Census Estimate for 2008

 Section Number: Form7\_Main Field Name: Children\_0\_1\_XIX Row Name: Infants <1 year of age Column Name: Title XIX %

Year: 2010 Field Note:

Based on the number of children <1 year enrolled in Medicaid for FFY 2008. Data Source: MD Medicaid

 Section Number: Form7\_Main Field Name: Children\_0\_1\_XXI Row Name: Infants <1 year of age Column Name: Title XXI %

Year: 2010 Field Note:

Based on the number of children <1 enrolled in MCHP or MCHP Premium for FFY 2008. Data Source: MD Medicaid

 Section Number: Form7\_Main Field Name: Children\_0\_1\_Private Row Name: Infants <1 year of age Column Name: Private/Other % Year: 2010

Field Note:

Data not available from MD Health Care Commission in single year of age increments.

 Section Number: Form7\_Main Field Name: Children\_0\_1\_None Row Name: Infants <1 year of age Column Name: None %

Year: 2010

**Field Note:**Data from the MD Health Care Commission not available in single year of age increments.

11. Section Number: Form7\_Main Field Name: Children\_1\_22\_TS Row Name: Children 1 to 22 years of age Column Name: Title V Total Served

Year: 2010 Field Note:

Based on MD residents 1 to 22 yrs old (inclusive), Maryland Department of Planning Census Estimate for 2008.

It is felt that this entire population benefits from the Title V activities throughout the state.

12. Section Number: Form7\_Main Field Name: Children\_1\_22\_XIX

Row Name: Children 1 to 22 years of age

Column Name: Title XIX %

Year: 2010 Field Note:

Percent of Children 0 to 19 years of age enrolled in Medicaid for FFY 2008. Data Source: MD Medicaid.

 Section Number: Form7\_Main Field Name: Children\_1\_22\_XXI

Row Name: Children 1 to 22 years of age

Column Name: Title XXI %

Year: 2010 Field Note:

Percent of Children 0 to 19 years of age enrolled in MCHP or MCHP Premium for FFY 2008. Data Source: MD Medicaid.

14. Section Number: Form7\_Main Field Name: Children\_1\_22\_Private Row Name: Children 1 to 22 years of age

Column Name: Private/Other % Year: 2010

Field Note:

Percent of Children 0 to 18 years of age with private or non-governmental forms of insurance for 2007. Data Source: MD Health Care Commission.

15. Section Number: Form7\_Main Field Name: Children\_1\_22\_None Row Name: Children 1 to 22 years of age

Column Name: None %

Year: 2010 Field Note:

Percent of Children 0 to 18 years of age that were uninsured in 2007. Data Source: MD Health Care Commission.

16. Section Number: Form7\_Main Field Name: CSHCN\_TS

Row Name: Children with Special Health Care Needs

Column Name: Title V Total Served

Year: 2010 Field Note:

This number (11,968) includes only those CSHCN receiving a relatively direct service from the OGCSHCN. These children received metabolic disease case management / dietary therapy (354), sickle cell disease case management (1,374), pediatric sickle cell disease clinic (242), transition clinic for sickle cell disease (42), transition clinic for diabetes (52), specialty clinic care at the local health departments (277), respite care (638, including PKU (29) and NF (86) camps), direct fee for service specialty care through Children's Medical Services (237), hemophilia case management (156), medical day care (110), assistance from our resource liaisons at the tertiary care centers (1,076), resource coordination through Parents Place of MD (541), case management from local health departments (1,011) and early intervention case management (5,858).

This does not include children receiving specialty care at the Centers of Excellence or the genetics centers and their outreach clinics. However, the specialty clinic system at the tertiary care centers, which receives a partial subsidy from the OGCSHCN, provided 149,352 specialty clinic visits for 60,360 patients. (These data include only Johns Hopkins and Children's National Medical Center. Due to loss of key staff, University of Maryland had no usable data to present.) The OGCSHCN subsidy helps support clinic infrastructure and wrap around services. The State designated Centers of Excellence that provide tertiary care to the children of Maryland had historically collected information on the source of payment on Maryland CSHCN and reported this to us as a requirement of their grant.. However with the loss of funding for data collection, this data is no longer provided. Historically, of the patients seen in genetics system (7,805), approximately 90% are children (7,025),but not all may be CSHCN. If these patients are counted, 79,353 CSHCN over a year of age were served, excluding the University of Maryland specialty clinics which historically see approximately 7,000 CSHCN. Since the loss of MARHGN funding for genetics data collection, we are unable to breakdown payer data on genetics patients. Likewise the genetics centers provided 10,365 specialtized lab tests but we have no way of knowing the age distribution of those receiving the tests.

The infants identified through newborn blood spot screening with endocrine or metabolic disorders (96) or sickle cell disease (103) or hearing impairment (213) are included in the infants and so not counted here.

The payer data presented to us does not allow us to distinguish CSHCN with MCHIP from those with regular MA or MCO care. However, according to the data on Maryland CSHCN in the 2005-2006 National Survey of CSHCN with the public payer data (23.1%), this is broken down into MCHIP (70.4%) and regular MA.

 Section Number: Form7\_Main Field Name: CSHCN\_XIX

Row Name: Children with Special Health Care Needs

Column Name: Title XIX %

Year: 2010 Field Note:

The insurance data presented here are based on data on 64,495 CSHCN receiving specialty care at the tertiary centers plus those receiving care through Children's Medical Services (the payer of last resort fee-for- service program for specialty care for low income CSHCN who are not eligible for other programs, operated by the OGCSHCN). (The tertiary care center data includes only Johns Hopkins and Children's National Medical Center. Due to loss of key staff, University of Maryland had no usable data to present.) The insurance data presented here cannot distinguish the data on patients receiving MCHIP from those receiving regular MA or MCO care. However, the breakdown, according to the data on Maryland CSHCN in the 2005-2006 National Survey of CSHCN regarding public payer data shows that of the children with public payers (23.1%), 70.4% receive payment through MCHIP and rest receive regular MA.

18. Section Number: Form7\_Main Field Name: CSHCN\_XXI

Row Name: Children with Special Health Care Needs

Column Name: Title XXI %

Year: 2010 Field Note:

The insurance data presented here are based on data on 64,495 CSHCN receiving specialty care at the tertiary centers plus those receiving care through Children's Medical Services (the payer of last resort fee-for- service program for specialty care for low income CSHCN who are not eligible for other programs, operated by the OGCSHCN). (The tertiary care center data includes only Johns Hopkins and Children's National Medical Center. Due to loss of key staff, University of Maryland had no usable data to present.) The insurance data presented here cannot distinguish the data on patients receiving MCHIP from those receiving regular MA or MCO care. However, the breakdown, according to the data on Maryland CSHCN in the 2005-2006 National Survey of CSHCN regarding public payer data shows that of the children with public payers (23.1%), 70.4% receive payment through MCHIP and rest receive regular MA.

19. Section Number: Form7\_Main Field Name: CSHCN\_Private

Row Name: Children with Special Health Care Needs

Column Name: Private/Other %

Year: 2010 Field Note:

The insurance data presented here are based on data on 64,495 CSHCN receiving specialty care at the tertiary centers plus those receiving care through Children's Medical Services (the payer of last resort fee-for- service program for specialty care for low income CSHCN who are not eligible for other programs, operated by the OGCSHCN). (The tertiary care center data includes only Johns Hopkins and Children's National Medical Center. Due to loss of key staff, University of Maryland had no usable data to

present.) The insurance data presented here cannot distinguish the data on patients receiving MCHIP from those receiving regular MA or MCO care. However, the breakdown, according to the data on Maryland CSHCN in the 2005-2006 National Survey of CSHCN regarding public payer data shows that of the children with public payers (23.1%), 70.4% receive payment through MCHIP and rest receive regular MA.

20. Section Number: Form7\_Main Field Name: CSHCN\_None

Row Name: Children with Special Health Care Needs

Column Name: None %

Year: 2010 Field Note:

The insurance data presented here are based on data on 64,495 CSHCN receiving specialty care at the tertiary centers plus those receiving care through Children's Medical Services (the payer of last resort fee-for- service program for specialty care for low income CSHCN who are not eligible for other programs, operated by the OGCSHCN). (The tertiary care center data includes only Johns Hopkins and Children's National Medical Center. Due to loss of key staff, University of Maryland had no usable data to present.) The insurance data presented here cannot distinguish the data on patients receiving MCHIP from those receiving regular MA or MCO care. However, the breakdown, according to the data on Maryland CSHCN in the 2005-2006 National Survey of CSHCN regarding public payer data shows that of the children with public payers (23.1%), 70.4% receive payment through MCHIP and rest receive regular MA.

Section Number: Form7 Main Field Name: CSHCN\_Unknown

Row Name: Children with Special Health Care Needs

Column Name: Unknown %

Year: 2010 Field Note:

The insurance data presented here are based on data on 64,495 CSHCN receiving specialty care at the tertiary centers plus those receiving care through Children's Medical Services (the payer of last resort fee-for- service program for specialty care for low income CSHCN who are not eligible for other programs, operated by the OGCSHCN). (The tertiary care center data includes only Johns Hopkins and Children's National Medical Center. Due to loss of Key staff, University of Maryland had no usable data to present.) The insurance data presented here cannot distinguish the data on patients receiving MCHIP from those receiving regular MA or MCO care. However, the breakdown, according to the data on Maryland CSHCN in the 2005-2006 National Survey of CSHCN regarding public payer data shows that of the children with public payers (23.1%), 70.4% receive payment through MCHIP and rest receive regular MA.

Section Number: Form7\_Main Field Name: AllOthers\_TS Row Name: Others

Column Name: Title V Total Served

Year: 2010

Field Note:

Source: "Others": In addition, approximately 7,830 non pregnant adults were provided with some service by OGCSHCN in FY 2008. (7,220 individually counted patients and approximately 10% of genetics patients). Screening services: 4,786 adults were provided carrier screening for sickle cell disease, 235 adults were provided Tay Sachs Disease carrier screening and 119 women were screened for high blood phenylalanine (before becoming pregnant ). In addition 89 adults with hemophilia received comprehensive treatment center clinic visits and 289 adult patients received sickle cell disease care at the adult sickle cell disease clinic. (Both those clinics are at Johns Hopkins.) However, we have no data on the distribution of payment in the above patients.

In addition, 7,805 individuals were seen by the State clinical genetics system. Among these 1,702 were not pediatric patients nor pregnant women but family members receiving genetic counseling. That leaves 6103 general genetic patients. Historically approximately 10% of the patients seen in general genetics clinic are adults (approximately 610 patients.)

In addition 10,365 persons received complex genetic testing. Since the withdrawal of federal funding for genetics data collection, we do not have the resources to collect data on the age distribution or method of payment of these patients.

The 159 pregnant women receiving AFP/ Quadruple Marker Screening are counted in pregnant women. We have no data on the distribution of payment in the above patients, however 117 of these patients were low enough in income to receive the service without charge- which usually means self pay/ no insurance

In addition to adults receiving a personal health service, 1,088 parents attended parent workshops on parenting children with special needs and managing transition to adult health services. (953 at Parents' Place of Maryland and 135 at the Kennedy Krieger Institute). This does not include the many parents attending disease specific support group meetings, sponsored in part by the OGCSHCN.

23. Section Number: Form7\_Main Field Name: AllOthers\_XIX Row Name: Others

Column Name: Title XIX % Year: 2010

Field Note:

Percent of adults ages 19-64 covered by Medicaid in 2007. Data Source: MD Health Care Commission.

Section Number: Form7\_Main Field Name: AllOthers XXI Row Name: Others Column Name: Title XXI %

Year: 2010 Field Note:

Data on MCHP not available from the MD Health Care Commission.

Section Number: Form7\_Main Field Name: AllOthers\_Private

Row Name: Others

Column Name: Private/Other %

Year: 2010 Field Note:

Percent of adults ages 19-64 covered by private insurance in 2007. Data Source: MD Health Care Commission.

Section Number: Form7\_Main Field Name: AllOthers\_None Row Name: Others Column Name: None %

Year: 2010 Field Note:

Percent of adults ages 19-64 uninsured in 2007. Data Source: MD Health Care Commission.

### FORM 8 DELIVERIES AND INFANTS SERVED BY TITLE V AND ENTITLED TO BENEFITS UNDER TITLE XIX (BY RACE AND ETHNICITY) [Sec. 506(A)(2)(C-D)] STATE: MD

Reporting Year: 2007

#### I. UNDUPLICATED COUNT BY RACE

	(A) Total All Races	(B) White	(C) Black or African American	(D) American Indian or Native Alaskan	(E) Asian	(F) Native Hawaiian or Other Pacific Islander	(G) More than one race reported	(H) Other and Unknown			
DELIVERIES	DELIVERIES										
Total Deliveries in State	78,057	46,281	26,331	139	4,918	23_	0	365			
Title V Served	78,057	46,281	26,331	139	4,918	23	0	365			
Eligible for Title XIX	28,484	9,083	12,804	67	607	0	91	5,832			
INFANTS											
Total Infants in State	75,408	41,288	26,172	333	4,214	108	3,293	0			
Title V Served	75,408	41,288	26,172	333	4,214	108	3,293	0			
Eligible for Title XIX	29,398	8,872	15,713	55	879	20	0	3,859			

#### II. UNDUPLICATED COUNT BY ETHNICITY

Or Latino         Latino         Reported         American         Unknown           DELIVERIES           Total Deliveries in State         67,345         10,607         105         2,206         83         515         7,283         5					HISPA	ANIC OR LATING	(Sub-categorie	s by country or area o	f origin)
Total Deliveries   67,345   10,607   105   2,206   83   515   7,283   515   10,607   105   2,206   83   515   7,283   515   10,607   105   2,206   83   515   7,283   7,283   7,		Total NOT Hispanic	Total Hispanic or	Ethnicity Not				Central and South	( B.5 ) Other and Unknown
in State	DELIVERIES								
Eligible for Title		67,345	10,607	105	2,206	83	515	7,283	520
NFANTS	Title V Served	67,345	10,607	105	2,206	83	515	7,283	520
Total Infants in State         64,622         10,786         0         0         0         0         0         0		20,090	5,742	0	0	0	0	0	0
State 04,022 10,780 0 0 0 0 0 0 0 0 0 0 0	INFANTS								
Title V Served 64,622 10,786 0 0 0 0 0 0 0		64,622	10,786	0	0	0	0	0	0
	Title V Served	64,622	10,786	0	0	0	0	0	0
Eligible for Title XIX         29,398         7,254         0 <t< td=""><td>Eligible for Title XIX</td><td>29,398</td><td>7,254</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td><td>0</td></t<>	Eligible for Title XIX	29,398	7,254	0	0	0	0	0	0

#### FORM NOTES FOR FORM 8

None

#### FIELD LEVEL NOTES

Section Number: Form8\_I. Unduplicated Count By Race

Field Name: DeliveriesTitleXIX\_All Row Name: Eligible for Title XIX Column Name: Total All Races

Field Note:

Data Source: MD HSCRC Hospital Discharge Data for 2007.

Section Number: Form8\_I. Unduplicated Count By Race

Field Name: InfantsTitleXIX\_All Row Name: Eligible for Title XIX Column Name: Total All Races

Year: 2010 Field Note:

Data Source: Medicaid, Federal Fiscal Year 2008. Excludes MCHP and MCHP Premium.

Section Number: Form8\_II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleXIX\_TotalNotHispanic
Row Name: Eligible for Title XIX Column Name: Total Not Hispanic or Latino

Year: 2010 Field Note:

Data Source: MD HSCRC Hospital Discharge data for 2007.

Section Number: Form8\_II. Unduplicated Count by Ethnicity

Field Name: DeliveriesTitleXIX\_TotalHispanic Row Name: Eligible for Title XIX Column Name: Total Hispanic or Latino

Year: 2010 Field Note:

Data Source: MD HSCRC Hospital Discharge data for 2007.

Section Number: Form8\_II. Unduplicated Count by Ethnicity

Field Name: InfantsTotal\_TotalHispanic Row Name: Total Infants in State Column Name: Total Hispanic or Latino

Year: 2010 Field Note:

Population estimates for subcategories of ethnicity are not available.

Section Number: Form8\_II. Unduplicated Count by Ethnicity Field Name: InfantsTitleV\_TotalHispanic

Row Name: Title V Served

Column Name: Total Hispanic or Latino

Year: 2010 Field Note:

Population estimates for subcategories of ethnicity are not available.

Section Number: Form8\_II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleXIX\_TotalNotHispanic

Row Name: Eligible for Title XIX Column Name: Total Not Hispanic or Latino

Year: 2010 Field Note:

Source: Medicaid, Federal Fiscal Year 2008. Excludes MCHP and MCHP Premium.

Section Number: Form8\_II. Unduplicated Count by Ethnicity

Field Name: InfantsTitleXIX\_TotalHispanic Row Name: Eligible for Title XIX Column Name: Total Hispanic or Latino

Year: 2010

Field Note:

Source: Medicaid, Federal Fiscal Year 2008. Excludes MCHP and MCHP Premium.

## FORM 9 STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM [Secs. 505(A)(E) AND 509(A)(8)] STATE: MD

	FY 2010	FY 2009	FY 2008	FY 2007	FY 2006
1. State MCH Toll-Free "Hotline" Telephone Number	800-456-8900	800-456-8900	800-456-8900	800-456-8900	800-456-8900
2. State MCH Toll-Free "Hotline" Name	MCH Hotline	MCH Hotline	MCH Hotline	MCH Hotline	MCH Hotline
3. Name of Contact Person for State MCH "Hotline"	J. Bobbe Frasier, Jr.	Arneda Johnson	Evita Burke	Evita Burke	Arneda Johnson
Contact Person's Telephone Number	410-767-5705	410-767-5158	410-767-5382	410-767-5382	410-767-8847
5. Contact Person's Email	FrasierB@dhmh.state.mc				
6. Number of calls received on the State MCH "Hotline" this reporting period	0	0	41,887	25,414	28,593

## FORM 9 STATE MCH TOLL-FREE TELEPHONE LINE DATA FORM (OPTIONAL) [Secs. 505(A)(E) AND 509(A)(B)] STATE: MD

	FY 2010	FY 2009	FY 2008	FY 2007	FY 2006
1. State MCH Toll-Free "Hotline" Telephone Number	(800)-638-8864	(800)-638-8864	(800)-638-8864	(800)-638-8864	(800)-638-8864
2. State MCH Toll-Free "Hotline" Name	Children's Resource Line				
3. Name of Contact Person for State MCH "Hotline"	Barbara Greer	Mary Anne Kane-Breschi	Mary Anne Kane-Breschi	Barbara Greer	Barbara Greer
4. Contact Person's Telephone Number	(410-)767-6730	(410)-767-6743	(410)-767-6743	(410-)767-6730	410-767-6730
5. Contact Person's Email	greerb@dhmh.state.md.u				
6. Number of calls received on the State MCH "Hotline" this reporting period	0	0	1,025	1,215	1,234

#### FORM NOTES FOR FORM 9

None

#### **FIELD LEVEL NOTES**

Section Number: Form9\_Main

Field Name: hname\_2

Row Name: State MCH toll-free hotline name

Column Name: FY Year: 2010 Field Note:

MCH and Medicaid have collaborated since 1990 on a joint MCH/Medicaid Hotline for pregnant women and children. The number, 1-800-456-8900 is connected to the 311-BABY hotline via the local number 410-767-11990 45. The person who "manages" this phone line is:

J. Bobbe Frasier, Jr. Chief, Division of HealthChoice Customer Relations

Maryland Medical Assistance Program 201 West Preston Street, Room 226-C Baltimore MD 21201 E-mail: FrasierB@dhmh.state.md.us

Voice mail: 410-767-5705

Section Number: Form9\_Main

Field Name: calls\_2

Row Name: Number of calls received On the State MCH Hotline This reporting period

Column Name: FY Year: 2008 Field Note:

Increase due to mail out initiative which started in mid 2008

Section Number: Form9\_Optional

Field Name: calls\_1

Row Name: Number of calls received On the State MCH Hotline This reporting period

Column Name: FY Year: 2008 Field Note:

Ms Kane- Breschi has left and Ms Barbara Greer is answering this phone. There were 1,025 calls in FY2008.

#### **FORM 10** TITLE V MATERNAL & CHILD HEALTH SERVICES BLOCK GRANT **STATE PROFILE FOR FY 2010** [SEC. 506(A)(1)]

STATE: MD

#### 1. State MCH Administration:

The Department of Health and Mental Hygiene, Family Health Administration (FHA) administers Maryland's Title V MCH Block Grant Program. The Title V Program provides leadership for maternal and child issues in Maryland, supports state and community needs assessment and planning activities, develops MCH policies and standards, and supports activities to protect, promote and improve the health of all women, children, adolescents and young adults including those with special health care needs. The Block Grant supports gap-filling direct services for the uninsured and the under-insured; enabling services, such as home visiting, care coordination and genetic counseling; population based services, such as newborn screening and blood lead testing; and infrastructure building activities such as epidemiological analyses and MCH standards development. FHA also provides leadership and direction for the WIC Program, the Title X Family Planning Program, the Primary Care Cooperative Agreement, Preventive Health Services, Health Promotion and Tobacco Use Prevention and Oral Health. The MCH Program partners and collaborates with other State agencies, advocacy groups, parent groups, providers and community based organizations to support mater and child health.

Block Grant Funds		
2. Federal Allocation (Line 1, Form 2)	\$ 11,955,050	
3. Unobligated balance (Line 2, Form 2)	\$ 0	
4. State Funds (Line 3, Form 2)	\$ 8,966,288	
5. Local MCH Funds (Line 4, Form 2)	\$ 0	
6. Other Funds (Line 5, Form 2)	\$ 0	
7. Program Income (Line 6, Form 2)	\$ 0	
8. Total Federal-State Partnership (Line 8, Form 2)	\$ 20,921,338	
9. Most significant providers receiving MCH funds:	 Tertiary Ca	Local Health Departments are/Academic Medical Centers
		Universities and Colleges
<ul> <li>10. Individuals served by the Title V Program (Col. A, Form 7)</li> <li>a. Pregnant Women</li> <li>b. Infants &lt; 1 year old</li> <li>c. Children 1 to 22 years old</li> <li>d. CSHCN</li> </ul>	77,252 75,362 1,656,916 11,968	
e. Others	 7,830	

- 11. Statewide Initiatives and Partnerships:
- a. Direct Medical Care and Enabling Services:

Pregnant women, mothers and infants: preconception counseling (including folic acid awareness for all women and genetic counseling), direct medical and dental services, family planning services, prenatal care including referrals for mental health and substance abuse services, outreach and enrollment services for Medicaid managed care and MCHP, public health nurse home visiting, and grief counseling (FIMR/SIDS). Children and adolescents: abstinence only education, school health clinics, public health nurse home visiting, oral health services, family planning and early intervention services. CSHCN: primary and specialty services for uninsured and underinsured children, care coordination, respite care, genetics testing and follow-up, genetics clinics, and medical day care centers.

#### b Population-Based Services:

(max 2500 characters)

Pregnant, mothers and infants: newborn screening, including universal newborn hearing screening, breastfeeding promotion, hepatitis B and congenital syphilis surveillance and monitoring, and dissemination of educational materials about postpartum depression, shaken baby syndrome, lead and other MCH issues. Children and adolescents: immunizations, lead screening, asthma control, dental fluoride program (fluoride tablet/rinse), teen pregnancy prevention, health education and promotion, obesity prevention, school screenings (hearing, vision, and scoliosis). CSHCN: genetics service outreach and education.

#### c. Infrastructure Building Services:

(max 2500 characters)

Title V resources support State and community health assessment, evaluation of public health strategies, policy and standards development, and quality monitoring. Emphasis is on improving/enhancing MCH epidemiological, fiscal and administrative capabilities to ensure accountability through monitoring of process and outcome measures. Pregnant women, mothers and infants: Maternal mortality review, Improved Pregnancy Outcome Program funds perinatal health coordinator in every jurisdiction and fetal, infant and mortality review processes; Crenshaw Perinatal Health Initiative (promotes regionalized systems of care), statewide maternal transport system, PRAMS, and coalition building: breastfeeding and FASD. Children and adolescents: early childhood systems planning, lead prevention targeting, asthma surveillance and coalition building, medical consultation for school health, and child fatality review. CSHCN: development of statewide CSHCN delivery system and statewide clinical genetics service system.

12. The primary Title V Program contact person:

13. The children with special health care needs (CSHCN) contact person:

Name Bonnie Birkel		Name	Susan R. Panny, M.D.
Title	Director, CMCH, DHMH	Title	Director, Genetics and CSHCN
Address	201 West Preston Street - Rm 317	Address	201 West Preston Strett, Room 421A

City	Baltimore	City	Baltimore
State	MD	State	MD
Zip	21201	Zip	21201
Phone	410-767-6717	Phone	410-767-6730
Fax	410-333-5233	Fax	410-333-5047
Email	birkelb@dhmh.state.md.us	Email	pannys@dhmh.state.md.us
Web	http://fha.maryland.gov/mch/	Web	fha.state.md.us

FORM NOTES FOR FORM 10
None

FIELD LEVEL NOTES

None

#### TRACKING PERFORMANCE MEASURES

[SECS 485 (2)(2)(B)(III) AND 486 (A)(2)(A)(III)]

STATE: MD

#### Form Level Notes for Form 11

Number of occurrent births is from MD Vital Statistics and is only provisional at this time.

#### PERFORMANCE MEASURE # 01

The percent of screen positive newborns who received timely follow up to definitive diagnosis and clinical management for condition(s) mandated by their State-sponsored newborn screening programs.

ewborn screening programs.									
				Annual C	bjective and Per		<u>ta</u>		
	2004		2005		2006	2007		2008	
Annual Performance Objective	·	95		95	9:	<u> </u>	95		95
Annual Indicator	r <u> </u>	0.00		100.0	100.	)	100.0		100.0
Numerator	r	132		125	170	)	182		199
Denominator	r	132		125	170	)	182		199
Data Source	•							NBS databa (NSS, NES StarLIMS, F	Γ,
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied  (Explain data in a year note. See Guidance, Appendix IX.  Is the Data Provisional or Final?								Provisional	
is the Data Provisional or Final						rinai		Piovisional	
				Annual C	Objective and Per	ormance Da	<u>ta</u>		
	2009		2010		2011	2012		2013	
Annual Performance Objective		99		99	99	)	99		99
Annual Indicator	Please fill in	only th	e Objectiv	es for the a	bove years. Nume	rator, Denom	inator and	Annual Indica	tors are

#### Field Level Notes

1. Section Number: Form11\_Performance Measure #1

Field Name: PM01 Row Name: Column Name: Year: 2008 Field Note:

Newborn screening data is reported by calendar year, CY 2008, to be consistent with the reports to the National Newborn Screening and Genetics Resource Center (NNSGRC).

not required for future year data.

Numerator

Denominator

A new performance measure is formulated as control of newborn screening laboratory testing was returned to the State. HB 216 (2008) gave the State Public Health Laboratory the sole authority to perform first tier newborn screening tests for Maryland babies. The bill went into effect 01/01/2009- so 2008 data is still fragmented -being collected from 4 different databases in 2 different labs. However, data will be better in the coming year being gathered from only 2 databases.

While we would like to maintain our record of treating 100% of confirmed cases, we are aware that a single case lost to follow up would significantly decrease our performance. It seems unrealistic to believe that a case could never be lost to follow up- although we are very tenacious.

The number of confirmed cases includes 103 sickling disorders but only 39 of them have "gold standard" confirmation. Only these 39 were reported to the NNSGRC. The remaining 64 have 2 abnormal NBS specimens but no electrophoresis done at over 3 months of age and no DNA.

2. Section Number: Form11\_Performance Measure #1

Field Name: PM01 Row Name: Column Name: Year: 2007 Field Note:

Newborn screening data is reported by calendar year, CY 2007, to be consistent with the reports to the National Newborn Screening and Genetics Resource Center.

A new performance objective is not formulated for the coming year. Problems in obtaining data from the commercial laboratory, insufficient IT resources and the loss of veteran follow up staff have made it almost impossible to compile accurate unduplicated data. The commercial lab does not report all abnormals, only presumptive positives, and they do not report data on all babies, only those born in Maryland hospitals with whom they have a contract. For example, they do not always report abnormals, even presumptive positives on home births or babies born to Maryland residents in DC who have their initial screen in DC but their subsequent screen in Maryland, or babies born in Maryland but then transferred to the NICU at Children's National Medical Center in Washington, DC. (Maryland has a 2 specimen system.)

The number of presumptive positives has decreased. New automated pipetting systems for the assays for T4 , TSH , galactosemia and biotinidase have reduced false positives. In addition, growing expertise with tandem mass spectrometry is reducing the false positives in the amino acid and acylcarnitine profiles. Our increasing expertise is due, in part , to courses taken by lab personnel at Duke and Mayo, to an ongiong relationship with Mayo and the "scorecard" project. Other factors include the constant refinement of cut offs, a lab subcommittee of our Advisory Council and the use of new ratios to evaluate abnormal patterns .

New legislation restoring a single newborn screening laboratory will take effect January 2009 and the newborn screening program will be reorganized. These changes make us confident that we can meet higher standards and have better data. Therefore a new objective is chosen for 2010.

3. Section Number: Form11\_Performance Measure #1

Field Name: PM01 Row Name: Column Name: Year: 2006 Field Note:

Newborn screening data is reported by calendar year, CY 2006, to be consistent with the reports to the National Newborn Screening and Genetics Resource Center.

A new performance objective is not formulated. We are not sure if we can sustain our historical strength in this area, in part because of the problems of obtaining data from the commercial laboratory and in part because of the loss of veteran follow up staff. The commercial lab does not report all abnormals, only presumptive positives, and they do not report data on all babies, only those born in Maryland hospitals with whom they have a contract. For example, they do not always report abnormals, even presumptive positives on home births or babies born to Maryland residents in DC who have their initial screen in DC but their subsequent screen in Maryland. (Maryland has a 2 specimen system.) However, we have made progress and now receive presumptive positives on military babies. The number of presumptive positives has not grown dramatically despite the addition of cystic fibrosis to the screening panel. New assays for T4 and TSH have reduced false positives. In addition, growing expertise with tandem mass spectrometry is reducing the false positives in the amino acid and acylcarnitine profiles.

PERFORMANCE MEASURE # 02					
The percent of children with special health care needs age 0 to 18 ye. (CSHCN survey)	ars whose families	partner in decision ma	king at all levels and	are satisfied with the	services they receive.
		Annual C	Objective and Perfor	mance Data	
	2004	2005	2006	2007	2008
Annual Performance Objective	70	70	71	72	55
Annual Indicator	68.1	68.1	68.1	54.8	54.8
Numerator	142,329	142,329	142,329		
Denominator	209,000	209,000	209,000		
Data Source	<b>)</b>				SLAITS 2005-2006
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.	! 				
Is the Data Provisional or Final?	•			Final	Final
		Annual (	Objective and Perfor	mance Data	
	2009	2010	2011	2012	2013
Annual Performance Objective	55.5	56	56.5	57	57
Annual Indicator Numerator	Please fill in only	the Objectives for the a	above years. Numera	tor, Denominator and	Annual Indicators are
Denominator		iuic yeai uaia.			

1. Section Number: Form11\_Performance Measure #2

Field Name: PM02 Row Name: Column Name: Year: 2008 Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM02 indicator for both the 2001 and the 2005-2006 CSHCN survey.

2. Section Number: Form11\_Performance Measure #2

Field Name: PM02 Row Name: Column Name: Year: 2007 Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM02 indicator for both the 2001 and the 2005-2006 CSHCN survey.

Annual Performance Objectives have been revised based on the most recent data.

3. Section Number: Form11\_Performance Measure #2

Field Name: PM02 Row Name: Column Name: Year: 2006 Field Note:

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure. The SLAITS data continue to be the best estimate of this performance measure.

PERFORMANCE MEASURE # 03								
The percent of children with special health care needs age 0 to 18 wh	o receive coordinat	ed, ongoing, compreh	ensive care within a r	medical home. (CSHC	N Survey)			
	Annual Objective and Performance Data							
	2004	2005	2006	2007	2008			
Annual Performance Objective	60	60	61	62	46			
Annual Indicator	56.3	56.3	56.3	45.6	45.6			
Numerator	117,667	117,667	117,667					
Denominator	209,000	209,000	209,000					
Data Source					SLAITS 2005-2006			
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)								
Is the Data Provisional or Final?				Final	Final			
		Annual (	Objective and Perfor	mance Data				
	2009	2010	2011	2012	2013			
Annual Performance Objective	46.5	47	47.5	48	48			
Annual Indicator Numerator	Please fill in only to not required for fut	he Objectives for the a ture year data.	above years. Numera	tor, Denominator and	Annual Indicators are			
Denominator								

1. Section Number: Form11\_Performance Measure #3

Field Name: PM03 **Row Name:** Column Name: Year: 2008 Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions and additions to the questions used to generate the NPM03 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #03.

2. Section Number: Form11\_Performance Measure #3

Field Name: PM03 Row Name: Column Name: Year: 2007 Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions and additions to the questions used to generate the NPM03 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #03.

3. Section Number: Form11\_Performance Measure #3

Field Name: PM03 **Row Name:** Column Name: Year: 2006 Field Note:

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure. The SLAITS data continue to be the best estimate of this performance

PERFORMANCE MEASURE # 04					
The percent of children with special health care needs age 0 to 18 wh Survey)	nose families have a	dequate private and/o	r public insurance to	pay for the services the	ney need. (CSHCN
		Annual C	Objective and Perfor	rmance Data	
	2004	2005	2006	2007	2008
Annual Performance Objective	70	70	70	70.5	65.7
Annual Indicator	67.5	67.5	67.5	65.5	65.5
Numerator	141,075	141,075	141,075		
Denominator	209,000	209,000	209,000		
Data Source	•				SLAITS 2005-2006
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.	! 				
Is the Data Provisional or Final?	•			Final	Final
		Annual C	Objective and Perfor	rmance Data	
	2009	2010	2011	2012	2013
Annual Performance Objective	65.9	66.1	66.3	66.5	66.5
Annual Indicator Numerator	Please fill in only t not required for ful	he Objectives for the a ture year data.	above years. Numera	tor, Denominator and	Annual Indicators are
Denominator	Ī				

1. Section Number: Form11\_Performance Measure #4

Field Name: PM04 Row Name: Column Name: Year: 2008 Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM04 indicator for both the 2001 and the 2005-2006 CSHCN survey.

2. Section Number: Form11\_Performance Measure #4

Field Name: PM04 Row Name: Column Name: Year: 2007 Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. The same questions were used to generate the NPM04 indicator for both the 2001 and the 2005-2006 CSHCN survey.

Annual Performance Objectives have been revised based on the most recent data.

3. Section Number: Form11\_Performance Measure #4

Field Name: PM04 Row Name: Column Name: Year: 2006 Field Note:

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure. The SLAITS data continue to be our best estimate of this performance

measure.

PERFORMANCE MEASURE # 05					
Percent of children with special health care needs age 0 to 18 whose Survey)	families report the c	community-based serv	ice systems are orga	nized so they can use	them easily. (CSHCN
		Annual C	Objective and Perfor	mance Data	
	2004	2005	2006	2007	2008
Annual Performance Objective	75	75	75	75.5	89.5
Annual Indicator	70.6	70.6	70.6	89.3	89.3
Numerator	147,554	147,554	147,554		
Denominator	209,000	209,000	209,000		
Data Source					SLAITS 2005-2006
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final
		Annual C	Objective and Perfor	mance Data	
	2009	2010	2011	2012	2013
Annual Performance Objective	89.7	89.9	90.1	90.3	90.3
Annual Indicator Numerator	Please fill in only the not required for fut-	he Objectives for the a ture year data.	above years. Numerat	tor, Denominator and	Annual Indicators are
Denominator					

1. Section Number: Form11\_Performance Measure #5

Field Name: PM05 Row Name: Column Name: Year: 2008 Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were revisions to the wording, ordering and the number of the questions used to generate the NPM05 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #05.

2. Section Number: Form11\_Performance Measure #5

Field Name: PM05 Row Name: Column Name: Year: 2007 Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were revisions to the wording, ordering and the number of the questions used to generate the NPM05 indicator for the 2005-2006 CSHCN survey. The data for the two surveys are not comparable for PM #05.

Annual Performance Objectives have been revised based on the most recent data.

3. Section Number: Form11\_Performance Measure #5

Field Name: PM05 Row Name: Column Name: Year: 2006 Field Note:

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure. The SLAITS data continue to be our best estimate of this performance measure.

PERFORMANCE MEASURE # 06					
The percentage of youth with special health care needs who received and independence.	the services necess	sary to make transitior	ns to all aspects of ad	ult life, including adult	health care, work,
		Annual C	bjective and Perfor	mance Data	
	2004	2005	2006	2007	2008
Annual Performance Objective	10	10	11	12	38
Annual Indicator	5.8	5.8	5.8	37.5	37.5
Numerator					
Denominator					
Data Source					SLAITS 2005-2006
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.					
Is the Data Provisional or Final?				Final	Final
		Annual C	Objective and Perfor	mance Data	
	2009	2010	2011	2012	2013
Annual Performance Objective	38.5	39	39.5	40	40
Annual Indicator Numerator	Please fill in only the not required for fut	ne Objectives for the a ure year data.	bove years. Numerat	or, Denominator and	Annual Indicators are
Denominator					

1. Section Number: Form11\_Performance Measure #6

Field Name: PM06 Row Name: Column Name: Year: 2008 Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate the NPM06 indicator for the 2005-2006 CSHCN survey. There were also issues around the reliability of the 2001 data because of the sample size. The data for the two surveys are not comparable for PM #06 and the 2005-2006 may be considered baseline data.

2. Section Number: Form11\_Performance Measure #6

Field Name: PM06 Row Name: Column Name: Year: 2007 Field Note:

Indicator data comes from the National Survey of CSHCN, conducted by HRSA and CDC, 2005-2006. Compared to the 2001 CSHCN survey, there were wording changes, skip pattern revisions, and additions to the questions used to generate the NPM06 indicator for the 2005-2006 CSHCN survey. There were also issues around the reliability of the 2001 data because of the sample size. The data for the two surveys are not comparable for PM #06 and the 2005-2006 may be considered baseline data.

Annual Performance Objectives have been revised based on the most recent data.

3. Section Number: Form11\_Performance Measure #6

Field Name: PM06 Row Name: Column Name: Year: 2006 Field Note:

The data reported in 2006 are pre-populated with the data from 2005 for this performance measure. The SLAITS data continue to be our best estimate of this performance

PERFORMANCE MEASURE # 07					
Percent of 19 to 35 month olds who have received full schedule of agr Haemophilus Influenza, and Hepatitis B.	e appropriate immu	nizations against Mea	sles, Mumps, Rubella	a, Polio, Diphtheria, Te	etanus, Pertussis,
		Annual C	Objective and Perfor	mance Data	
	2004	2005	2006	2007	2008
Annual Performance Objective	80	85.1	81	83	86.5
Annual Indicator	80.0	80.0	79.9	92.4	92.4
Numerator	180,072	180,072	176,242	206,988	206,988
Denominator	225,089	225,089	220,579	224,013	224,013
Data Source					Vital Statistics 2007 and Oral Health Survey 05-06
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.					
(Explain data in a year note. See Guidance, Appendix IX.) Is the Data Provisional or Final?				Final	
		Annual C	Objective and Perfor	mance Data	
	2009	2010	2011	2012	2013
Annual Performance Objective	93	93	93	93	93
Annual Indicator Numerator Denominator	Please fill in only the not required for fut	ne Objectives for the aure year data.	above years. Numera	tor, Denominator and	Annual Indicators are

1. Section Number: Form11\_Performance Measure #7

Field Name: PM07 Row Name: Column Name: Year: 2008 Field Note:

Estimated percentage is based on data from the National Immunization Survey, Q1-Q42007- 92.4% immunized according to 4:3:1:3:3 series. This percentage was applied to the estimated number of children between the ages of 1-3 in 2007 based on Maryland Vital Statistics reports. Data for 2008 is currently unavailable.

2. Section Number: Form11\_Performance Measure #7

Field Name: PM07 Row Name: Column Name: Year: 2007 Field Note:

Estimated percentage is based on data from the National Immunization Survey, Q1-Q42007- 92.4% immunized according to 4:3:1:3:3 series. This percentage was applied to the estimated number of children between the ages of 1-3 in 2007(Source: Maryland Vital Statistics population estimates).

3. Section Number: Form11\_Performance Measure #7

Field Name: PM07 Row Name: Column Name: Year: 2006 Field Note:

Estimated percentage is based on data from the National Immunization Survey, Q1-Q42006 - 79.9% immunized according to 4:3:1:3:3 series. This percentage was applied to the estimated number of children between the ages of 1-3 in 2006 (Source: Maryland Vital Statistics population estimates).

PERFORMANCE MEASURE # 08					
The rate of birth (per 1,000) for teenagers aged 15 through 17 years.					
	Annual Objective and Performance Data				
	2004	2005	2006	2007	2008
Annual Performance Objective	24.6	17.9	17.4	16.4	16.4
Annual Indicator	17.9	16.8	17.5	18.3	18.2
Numerator	2,106	2,047	2,118	2,200	2,200
Denominator	117,602	121,697	121,211	120,146	120,894
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  (Explain data in a year note. See Guidance, Appendix IX.)					MD Vital Statistics
Is the Data Provisional or Final?	Final Provisional  Annual Objective and Performance Data  2009 2010 2011 2012 2013				
Annual Performance Objective	17.5	17.5	17.5	17.5	17.5
Annual Indicator Numerator		ne Objectives for the a	above years. Numera	tor, Denominator and	Annual Indicators a

1. Section Number: Form11\_Performance Measure #8
Field Name: PM08
Row Name:
Column Name:
Year: 2008
Field Nete: Field Note:

2008 data is not yet available - used 2007 data estimate

2. Section Number: Form11\_Performance Measure #8 Field Name: PM08

Row Name: Column Name: Year: 2007 Field Note:

Source: 2006 Maryland Vital Statistics Report; Data estimated for 2007 and based on 2006 findings.

Denominator

PERFORMANCE MEASURE # 09						
Percent of third grade children who have received protective sealants	on at least one perr	manent molar t	ooth.			
		<u>A</u> 1	nual Obje	ective and Perfor	mance Data	
	2004	2005	2	006	2007	2008
Annual Performance Objective	30		30	30	30	42.5
Annual Indicator	23.7		23.7	23.7	42.2	51.6
Numerator	17,703	17	7,703	17,703	25,466	34,145
Denominator	74,696	74	4,696	74,696	60,400	66,173
Data Source	1					MSDE Public and Non-Public School Enrollment
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  (Explain data in a year note. See Guidance, Appendix IX.)						
Is the Data Provisional or Final?					Final	Final
		<u>Aı</u>	nual Obje	ective and Perfor	mance Data	
	2009	2010	2	011	2012	2013
Annual Performance Objective	52		52	52	52	52
Annual Indicator Numerator Denominator	Please fill in only the not required for futi		or the abov	ve years. Numerat	or, Denominator and	Annual Indicators a

Section Number: Form11\_Performance Measure #9
 Field Name: PM09
 Page Name: PM09

Field Name: PM0 Row Name: Column Name: Year: 2007 Field Note:

Source: University of Maryland Dental School. Survey of the Oral Health Status of Maryland School Children, 2005-2006 School Year. This is a periodic survey conducted by the University, last conducted in 2001-2002.. Based on weighted prevalence of dental sealants among MD 3rd graders during the 2005-2006 school year.

		<u>Annual</u>	Objective and Perfor	mance Data	
	2004	2005	2006	2007	2008
Annual Performance Objective	3.5	2.6	3	3	3.
Annual Indicator	3.4	2.4	2.5	3.1	2.
Numerator	39	28	28	34	3-
Denominator	1,153,514	1,153,348	1,112,945	1,107,687	1,160,56
Data Source					MD Vital Statisti Data (2007)
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final
		Annual	Objective and Perfor	mance Data	
	2009	2010	2011	2012	2013
	2.9	2.9	2.9	2.9	2.9

1. Section Number: Form11\_Performance Measure #10
Field Name: PM10
Row Name:
Column Name:
Year: 2008
Field Note:
Data for 2008 not available. Estimate based on Vital Statistics Administration data from 2007.

PERFORMANCE MEASURE # 11								
The percent of mothers who breastfeed their infants at 6 months of ag	je.							
				Annual C	Objective and Pe			
	2004		2005		2006	2007		2008
Annual Performance Objective						-2	44	41
Annual Indicator				40.8	40	2	43.0	43.0
Numerator				29,085	31,12	27	33,565	33,565
Denominator	-			71,286	77,43	30	78,057	78,057
Data Source								MD PRAMS Report 2007 births
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  (Explain data in a year note. See Guidance, Appendix IX.)						_		
Is the Data Provisional or Final?						Prov	risional	Provisional
				Annual C	Objective and Pe	formance	<u> Data</u>	
	2009		2010		2011	2012	2	2013
Annual Performance Objective		44		44	4	4	44	44
Annual Indicator Numerator Denominator	Please fill not require				above years. Num	erator, De	nominator and	Annual Indicators are

1. Section Number: Form11\_Performance Measure #11

Field Name: PM11 Row Name: Column Name: Year: 2008 Field Note:

Field Note:
Maryland PRAMS report 2007 births data applied to number of births indicated by MD Vital Statistics Annual Report 2007

2. Section Number: Form11\_Performance Measure #11

Field Name: PM11 Row Name: Column Name: Year: 2007 Field Note:

Source: National Immunization Survey. Breastfeeding rates for Maryland children born in 2004. Indicates that an estimated 40.2% of Maryland women were breastfeeding at 6 months. This percentage was applied to the number of births in Maryland in 2006. Data for 2007 is currently unavailable.

3. Section Number: Form11\_Performance Measure #11 Field Name: PM11

Field Name: PM Row Name: Column Name: Year: 2006 Field Note:

Source: National Immunization Survey Breastfeeding rates for Maryland children born in 2004. Indicates that an estimated 40.2% of Maryland women were breastfeeding at 6 months. This percentage was applied to the number of births in Maryland in 2006.

PERFORMANCE MEASURE # 12					
Percentage of newborns who have been screened for hearing before I	hospital discharge.				
		Annual C	Objective and Perfor	mance Data	
	2004	2005	2006	2007	2008
Annual Performance Objective	90	90	90	90	90
Annual Indicator	91.2	88.5	89.4	92.5	98.8
Numerator	64,793	62,870	64,657	68,622	74,276
Denominator	71,083	71,013	72,345	74,196	75,210
Data Source					State IH System
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional
		Annual C	Objective and Perfor	mance Data	
	2009	2010	2011	2012	2013
Annual Performance Objective	98	98	99	99	99
	Please fill in only the not required for fut		above years. Numerat	tor, Denominator and	Annual Indicators are

1. Section Number: Form11\_Performance Measure #12

Field Name: PM12 Row Name: Column Name: Year: 2008 Field Note:

Number of occurrent births is from MD Vital Statistics and is only provisional at this time. The screening data is primarily from the old state IH system because the new OZ eSP system was not in place for the full year.

While we would like to maintain our progress in screening an increasing percentage of babies before hospital discharge, our historical struggles with databases and providers, make us wary of setting 100% as the measure for satisfactory performance. It may not be realistic.

2. Section Number: Form11\_Performance Measure #12

Field Name: PM12 Row Name: Column Name: Year: 2006 Field Note:

Newborn hearing screening data is reported by fiscal year, FY 2006.

PERFORMANCE MEASURE # 13					
Percent of children without health insurance.					
			Objective and Perfor		
	2004	2005	2006	2007	2008
Annual Performance Objective	10	9.5	9.6	9.6	12.1
Annual Indicator	9.6	9.6	12.0	12.0	10.0
Numerator	133,902	133,902	163,264	163,264	150,000
Denominator	1,394,808	1,394,808	1,360,531	1,360,531	1,500,000
Data Source					MHCC (2007)
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	Provisional
		Annual C	Objective and Perfor	mance Data	
	2009	2010	2011	2012	2013
Annual Performance Objective	10	10	10	10	10
	Please fill in only th	he Objectives for the a ure year data.	above years. Numera	or, Denominator and	Annual Indicators a

1. Section Number: Form11\_Performance Measure #13

Field Name: PM13 Row Name: Column Name: Year: 2008 Field Note:

Health Insurance coverage in Maryland through 2007 (January 2009)

Denominator

2. Section Number: Form11\_Performance Measure #13

Field Name: PM13 Row Name: Column Name: Year: 2007 Field Note:

Source: Maryland Health Care Commission, Maryland Health Insurance Coverage in 2005-2006, issued November 2007. Estimates that 12% of children under the age of 19 in Maryland are were uninsured. Based on findings frm the March 2007 Bureau of the Census revised Current Population Survey estimates. Estimate based on 2005-2006 findings since data for 2007 is currently unavailable.

3. Section Number: Form11\_Performance Measure #13

Field Name: PM13 Row Name: Column Name: Year: 2006 Field Note:

Source: Maryland Health Care Commission, Maryland Health Insurance Coverage in 2005-2006, issued November 2007. Estimates that 12% of children under the age of 18 in Maryland are were uninsured. Based on findings frm the March 2007 Bureau of the Census revised Current Population Survey estimates. Population estimate from 2006 Vital Statistics report for ages 0-17.

PERFORMANCE MEASURE # 14					
Percentage of children, ages 2 to 5 years, receiving WIC services with	n a Body Mass Inde	x (BMI) at or above	the 85th percentile.		
	2004	2005	2006	2007	2008
Annual Performance Objective			32.5	32.5	32.5
Annual Indicator		33.0	33.0	33.0	33.0
Numerator		10,944	10,944	11,881	13,308
Denominator		33,164	33,164	36,002	40,326
Data Source					WIC Program Data for 2008
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Final
		<u>Annua</u> l	l Objective and Perfor	rmance Data	
	2009	2010	2011	2012	2013
Annual Performance Objective	32	32	32	32	32
Annual Indicator Numerator Denominator	Please fill in only the not required for fut-		e above years. Numera	tor, Denominator and	Annual Indicators are

1. Section Number: Form11\_Performance Measure #14

Field Name: PM14 Row Name: Column Name: Year: 2008 Field Note:

Field Note:
Maryland WIC Program data.Maryland WIC estimates for 2008 based on enrollment and BMI analysis for the period, July-December 2008.

2. Section Number: Form11\_Performance Measure #14 Field Name: PM14

Field Name: PM' Row Name: Column Name: Year: 2007 Field Note:

Source: Maryland WIC Program data. Maryland WIC estimates for 2007 based on enrollment and BMI analysis for the period, July-December 2007.

PERFORMANCE MEASURE # 15					
Percentage of women who smoke in the last three months of pregnand	cy.				
		<u>Annual</u>	Objective and Perfor	mance Data	
	2004	2005	2006	2007	2008
Annual Performance Objective			10.9	10.7	7.6
Annual Indicator		11.1	7.8	9.3	9.3
Numerator		8,270	6,040	6,160	6,160
Denominator		74,500	77,430	66,425	66,425
Data Source					2007 MD PRAMS
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  (Explain data in a year note. See Guidance, Appendix IX.)			-		
Is the Data Provisional or Final?				Final	Provisional
		Annual	Objective and Perfor	mance Data	
i	2009	2010	2011	2012	2013
Annual Performance Objective	9	9	9	9	9
	Please fill in only the not required for future		above years. Numera	tor, Denominator and	Annual Indicators are

1. Section Number: Form11\_Performance Measure #15
Field Name: PM15
Row Name:
Column Name:
Year: 2008
Field Note:

Numerator, denominator, and percentage based on MD PRAMS estimates for 2007.

2. Section Number: Form11\_Performance Measure #15 Field Name: PM15

Row Name: Column Name: Year: 2007 Field Note:

Numerator, denominator, and percentage estimates based on MD PRAMS

				Annual C	bjective and Perfor	mance Data	
	2004		2005		2006	2007	2008
Annual Performance Objective		5.2		5.9	4.7	4.6	4.1
Annual Indicator		4.8		6.2	4.2	6.6	6.6
Numerator		19		25	17	27	27
Denominator	39	96,044		405,382	406,425	408,340	408,340
Data Source							MD Vital Statistics Annual Report 20
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  (Explain data in a year note. See Guidance, Appendix IX.)							
Is the Data Provisional or Final?						Provisional	Provisional
				Annual C	bjective and Perfor	mance Data	
	2009		2010		2011	2012	2013
Annual Performance Objective		6.6		6.6	6.6	6.6	6.6

1. Section Number: Form11\_Performance Measure #16
Field Name: PM16
Row Name:
Column Name: Year: 2008 Field Note:

2008 data is not available so 2007 data has been used

2. Section Number: Form11\_Performance Measure #16 Field Name: PM16

Row Name: Column Name: Year: 2007 Field Note:

Estimate based on 2006 data. Data for 2007 is currently unavailable.

Percent of very low birth weight infants delivered at facilities for high-risk deliveries and neonate 2004 20  Annual Performance Objective 90  Annual Indicator 89.3  Numerator 1,180  Denominator 1,322	Annual C	2006  89.5  87.8  1,138  1,296	89.6 89.3 1,138	89.7 89.3 1,138 1,275
Annual Performance Objective         90           Annual Indicator         89.3           Numerator         1,180	87.5 88.7 1,070	89.5 87.8 1,138	89.6 89.3 1,138	89.7 89.3 1,138
Annual Performance Objective         90           Annual Indicator         89.3           Numerator         1,180	87.5 88.7 1,070	89.5 87.8 1,138	89.6 89.3 1,138	89.7 89.3 1,138
Annual Indicator         89.3           Numerator         1,180	88.7 1,070	87.8 1,138	89.3 1,138	89.3 1,138
Numerator 1,180	1,070	1,138	1,138	1,138
<b>Denominator</b> 1,322	1,206	1,296	1,275	1,275
Data Source				MD DHMH, Vital Statistics Administration
Check this box if you cannot report the numerator because  1. There are fewer than 5 events over the last year, and  2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  (Explain data in a year note. See Guidance, Appendix IX.)				
Is the Data Provisional or Final?			Final	Provisional
	Annual C	Objective and Perfor	mance Data	
2009 20	10	2011	2012	2013
Annual Performance Objective 89.8	90	90	90	90
Annual Indicator				A I I . P
Numerator Please fill in only the Ob Numerator not required for future yo		above years. Numerat	tor, Denominator and	Annual Indicators are

Section Number: Form11\_Performance Measure #17 Field Name: PM17 Row Name:

Column Name: Year: 2008 Field Note:

Data for 2008 not available. Estimate based on Vital Statistics Administration data from 2007.

Denominator

2. Section Number: Form11\_Performance Measure #17

Field Name: PM17 Row Name: Column Name: Year: 2007 Field Note:

Data provided by Vital Statistics Administration.

3. Section Number: Form11\_Performance Measure #17 Field Name: PM17

Row Name: Column Name: Year: 2006 Field Note:

Source: Maryland Vital Statistics Administration. Defined as vlbw admissions to Level III hospitals in MD and excludes 42 cases for whom status was unknown.

			Annual C	bjective and Perfor	mance Data	
	2004	2005		2006	2007	2008
Annual Performance Objective	90		83.9	82.3	82.4	81
Annual Indicator	82.3		81.3	81.7	79.5	79.5
Numerator	60,235		59,896	62,261	62,068	62,068
Denominator	73,230		73,678	76,248	78,057	78,057
Data Source Check this box if you cannot report the numerator because						MD Vital Statistic Annual Report 20
There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.      (Explain data in a year note. See Guidance, Appendix IX.)						
Is the Data Provisional or Final?					Final	Provisional
			Annual C	bjective and Perfor	mance Data	
	2009	2010		2011	2012	2013
	80		80	80	80	80

1. Section Number: Form11\_Performance Measure #18
Field Name: PM18
Row Name:
Column Name:
Year: 2008
Field Note:
Data for 2008 not available.

STATE PERFORMANCE MEASURE # 1					
Percent of pregnancies that are intended					
		<u>Annual</u>	Objective and Perfor	mance Data	
	2004	2005	2006	2007	2008
Annual Performance Objective			58.9	60	60
Annual Indicator	58.8	57.0	59.7	56.7	56.7
Numerator	43,806	42,682	46,226	44,258	44,258
Denominator	74,500	74,880	77,430	78,057	78,057
Data Source					MD PRAMS Report 2007
Is the Data Provisional or Final?				Final	Provisional
		Annual	Objective and Perfor	mance Data	
	2009	2010	2011	2012	2013
Annual Performance Objective	60	60.5	60.5	60.5	60.5
Annual Indicator Numerator Denominator	Please fill in only the not required for future.		above years. Numera	tor, Denominator and	Annual Indicators are

1. Section Number: Form11\_State Performance Measure #1 Field Name: SM1

Field Name: SM Row Name: Column Name: Year: 2008 Field Note:

2008 data is not available so 2007 data has been used

2. Section Number: Form11\_State Performance Measure #1 Field Name: SM1

Field Name: SN Row Name: Column Name: Year: 2007 Field Note:

Source: Estimate based on findings from the 2006 PRAMS report. Data for 2007 is unavailable.

3. Section Number: Form11\_State Performance Measure #1

Field Name: SM1 Row Name: Column Name: Year: 2006 Field Note:

Source: 2006 Maryland PRAMS Report, page 7.

STATE PERFORMANCE MEASURE # 2					
Percent of women reporting alcohol use in the last three months of pre	egnancy				
		Annual C	Objective and Perfor	mance Data	
	2004	2005	2006	2007	2008
Annual Performance Objective			9.8	9.7	7
Annual Indicator	7.2	6.5	7.3	7.4	7.4
Numerator	5,364	4,867	4,842	4,914	4,914
Denominator	74,500	74,880	66,619	66,622	66,622
Data Source					MD PRAMS 2007
Is the Data Provisional or Final?				Final	Provisional
		Annual C	Objective and Perfor	mance Data	
	2009	2010	2011	2012	2013
Annual Performance Objective	7	7	7	7	7
Annual Indicator Numerator Denominator	Please fill in only th	ne Objectives for the a ure year data.	above years. Numera	tor, Denominator and	Annual Indicators are

1. Section Number: Form11\_State Performance Measure #2

Field Name: SM2 Row Name: Column Name: Year: 2008 Field Note:

Data for 2008 is not yet available, based on MD PRAMS 2007 data

2. Section Number: Form11\_State Performance Measure #2 Field Name: SM2 Row Name:

Field Name: SM2 Row Name: Column Name: Year: 2007 Field Note: MD PRAMS 2007

3. Section Number: Form11\_State Performance Measure #2 Field Name: SM2 Row Name:

Field Name: SM2 Row Name: Column Name: Year: 2006 Field Note: MD PRAMS 2006

STATE PERFORMANCE MEASURE # 3					
Percent of Maryland kindergartners entering school ready to learn					
		<u>Annual</u>	Objective and Perfor	rmance Data	
	2004	2005	2006	2007	2008
Annual Performance Objective			61	67	68
Annual Indicator	58.0	60.0	67.0	67.0	73.3
Numerator	26,086	31,889	37,609	37,609	42,366
Denominator	44,975	53,148	56,133	56,133	57,775
Data Source	,				MSDE School Readiness Report 2008
Is the Data Provisional or Final?	•			Final	Final
		<u>Annual</u>	Objective and Perfor	rmance Data	
	2009	2010	2011	2012	2013
Annual Performance Objective	69	70	71	72	72
Annual Indicator Numerator	Please fill in only the not required for fut		above years. Numera	tor, Denominator and	Annual Indicators are
Denominator		aro your data.			

Section Number: Form11\_State Performance Measure #3

Field Name: SM3 **Row Name:** Column Name: Year: 2007 Field Note:

The Maryland Model for School Readiness (MMSR) defines early learning standards and indicators of what children should know and are able to do before they start formal education. The MMSR includes as its assessment component the Work Sampling System™ (WSS), a portfolio-based assessment system that helps teachers to document and evaluate children's skills, knowledge, behavior, and academic accomplishments across a variety of curricular areas. This is done by ongoing observation, recording, and evaluation of daily classroom experiences and activities that help teachers to gain a better understanding of what students know, are able to do, and areas requiring more work. The seven WSS™ learning domains are:

1. Social and Personal Development;

- 2. Language and Literacy;
- 3. Mathematical Thinking;
- 4. Scientific Thinking;
- 5. Social Studies;
- 6. The Arts;
- 7. Physical Development and Health.
- Section Number: Form11\_State Performance Measure #3

Field Name: SM3 Row Name: Column Name: Year: 2006 Field Note:

Source: MD School Readiness Report.

STATE PERFORMANCE MEASURE # 4					
Rate of emergency department visits for asthma per 10,000 children,	ages 0-4				
		Annual C	Objective and Perfor	mance Data	
	2004	2005	2006	2007	2008
Annual Performance Objective	•		170	200	220
Annual Indicator	186.1	203.1	221.9	186.5	186.5
Numerator	6,783	7,749	8,171	7,026	7,026
Denominator	364,507	381,487	368,199	376,745	376,745
Data Source	•				State Asthma Surveillance
Is the Data Provisional or Final?	•			Final	Provisional
		Annual C	Objective and Perfor	mance Data	
	2009	2010	2011	2012	2013
Annual Performance Objective	220	218	218	218	218
Annual Indicator Numerator Denominator	Please fill in only the not required for future.		above years. Numera	tor, Denominator and	Annual Indicators are

Section Number: Form11\_State Performance Measure #4
 Field Name: SM4

Field Name: SM Row Name: Column Name: Year: 2007 Field Note:

Source: HSCRC Hospital Discharge data and ambulatory data. NCHS Vintage 2007 Population File

2. Section Number: Form11\_State Performance Measure #4 Field Name: SM4

Field Name: SM Row Name: Column Name: Year: 2006 Field Note:

Source: MD Health Care Commission Reports for 2006.

STATE PERFORMANCE MEASURE # 5					
Percent of Maryland 12th graders who graduate from high school					
		<u>Annual</u>	Objective and Perfor	mance Data	
	2004	2005	2006	2007	2008
Annual Performance Objective			84.9	86	86.1
Annual Indicator	84.3	84.8	85.4	85.4	96.5
Numerator			51,800	51,800	59,626
Denominator	·		60,656	60,656	61,767
Data Source					Summary of Attendance Maryland Public Schools 2007
Is the Data Provisional or Final?				Final	Final
		<u>Annual</u>	Objective and Perfor	mance Data	
	2009	2010	2011	2012	2013
Annual Performance Objective	86.2	86.3	86.4	86.4	90
Annual Indicator Numerator Denominator	Please fill in only the not required for futi		above years. Numera	tor, Denominator and	Annual Indicators are

1. Section Number: Form11\_State Performance Measure #5

Field Name: SM5 Row Name: Column Name: Year: 2008 Field Note:

Data from Summary of Attendance Maryland Public Schools 2007-2008

2. Section Number: Form11\_State Performance Measure #5

Field Name: SM5 Row Name: Column Name: Year: 2007 Field Note:

Source: Estimate based on Maryland State Department of Education, Maryland Report Card for the 2006/2007 School year.

3. Section Number: Form11\_State Performance Measure #5

Field Name: SM5 Row Name: Column Name: Year: 2006 Field Note:

Source: Maryland State Department of Education, Maryland Report Card for the 2006/2007 School year.

STATE PERFORMANCE MEASURE # 6							
Percentage of local jurisdictions addressing the issue of respite for far	milies of CSHCN						
	Annual Objective and Performance Data						
	2004	2005	2006	2007	2008		
Annual Performance Objective	75	75	75	75	62.5		
Annual Indicator	66.7	70.8	66.7	62.5	62.5		
Numerator	16	17	16	15	15		
Denominator	24	24	24	24	24		
Data Source					OGCSHCN Grantee Reports		
Is the Data Provisional or Final?				Final	Final		
		Annual C	Objective and Perfor	mance Data			
	2009	2010	2011	2012	2013		
Annual Performance Objective	62.5	62.5	66	66	70		
Annual Indicator Numerator Denominator	Please fill in only the not required for futi		above years. Numera	tor, Denominator and	Annual Indicators are		

1. Section Number: Form11\_State Performance Measure #6

Field Name: SM6 Row Name: Column Name: Year: 2008 Field Note:

Source: Data from OGCSHCN. Number of jurisdictions awarded grants from OGCSHCN to fund respite services.

2. Section Number: Form11\_State Performance Measure #6 Field Name: SM6

Field Name: SN Row Name: Column Name: Year: 2007 Field Note:

Source: Data from OGCSHCN. Number of jurisdictions awarded grants from OGCSHCN to fund respite services.

Annual Performance Objectives have been revised based on the most recent data.

3. Section Number: Form11\_State Performance Measure #6

Field Name: SM6 Row Name: Column Name: Year: 2006 Field Note:

Source: Data from OGCSHCN. Number of jurisdictions awarded grants from OGCSHCN to fund respite services.

STATE PERFORMANCE MEASURE # 7					
Percent of mothers breastfeeding at six months					
		Annual C	Objective and Perfor	mance Data	
	2004	2005	2006	2007	2008
Annual Performance Objective			42	44	46
Annual Indicator		40.8	40.8	40.8	
Numerator		29,085	29,085	29,085	
Denominator		71,286	71,286	71,286	
Data Source					
Is the Data Provisional or Final?				Provisional	
		Annual C	Objective and Perfor	mance Data	
	2009	2010	2011	2012	2013
Annual Performance Objective	48	50	50	50	50
Annual Indicator Numerator Denominator	Please fill in only th not required for futu		above years. Numerat	tor, Denominator and	Annual Indicators are

1. Section Number: Form11\_State Performance Measure #7

Field Name: SM7 Row Name: Column Name: Year: 2008 Field Note:

Field Note:
This is no longer a state performance measure because it is a national performance measure.

2. Section Number: Form11\_State Performance Measure #7 Field Name: SM7 Row Name:

Row Name: SM Row Name: Column Name: Year: 2007 Field Note:

This is no longer a state performance measure because it is a national performance measure.

STATE PERFORMANCE MEASURE # 8										
Percent of local jurisdictions with written plans to address racial and ethnic disparities in maternal and child health										
		Annual C	Objective and Perfor	mance Data						
	2004	2005	2006	2007	2008					
Annual Performance Objective			2	10	15					
Annual Indicator		8.3	8.3	8.3	12.5					
Numerator		2	2	2	3					
Denominator		24	24	24	24					
Data Source					Survey of LHD MCH Programs					
Is the Data Provisional or Final?				Final	Provisional					
		Annual C	Objective and Perfor	manco Data						
	2009	2010	2011	2012	2013					
Annual Performance Objective	15	20	20	20	20					
Annual Indicator Numerator Denominator	Please fill in only th not required for futu		above years. Numera	tor, Denominator and	Annual Indicators are					

1. Section Number: Form11\_State Performance Measure #8
Field Name: SM8
Row Name:
Column Name:
Year: 2007
Field Note:
Source: Survey of local health department MCH programs.

STATE PERFORMANCE MEASURE # 9									
Percent of jurisdictions that partner with medical homes to develop an	d to disseminate res	ource materials.							
	Annual Objective and Performance Data								
	2004	2005	2006	2007	2008				
Annual Performance Objective			41.6	50	58.3				
Annual Indicator		33.3	41.7	41.7	41.7				
Numerator		8	10	10	10				
Denominator		24	24	24	24				
Data Source					OGCSHCN Grantee Reports and survey of LHDs				
Is the Data Provisional or Final?				Final	Final				
		Annual (	Objective and Perfor	rmance Data					
	2009	2010	2011	2012	2013				
Annual Performance Objective	45	50	54	58	62				
Annual Indicator Numerator Denominator	Please fill in only the not required for future		above years. Numera	tor, Denominator and	Annual Indicators are				

1. Section Number: Form11\_State Performance Measure #9

Field Name: SM9 Row Name: Column Name: Year: 2008 Field Note:

Source: OGCSHCN survey of local jurisdictions. Currently reflects number of jurisdictions developing resource guides/materials and distributing these to pediatric health care providers to share with families.

2. Section Number: Form11\_State Performance Measure #9

Field Name: SM9 Row Name: Column Name: Year: 2007 Field Note:

OGCSHCN survey of local jurisdictions. Currently reflects number of jurisdictions developing resource guides/materials and distributing these to pediatric health care providers to share with families.

3. Section Number: Form11\_State Performance Measure #9

Field Name: SM9 Row Name: Column Name: Year: 2006 Field Note:

OGCSHCN survey of local jurisdictions. Currently reflects number of jurisdictions developing resource guides/materials and distributing these to pediatric health care providers to share with families.

STATE PERFORMANCE MEASURE # 10					
Number of policy or issue briefs developed by the Title V program					
		Annual O	bjective and Perfor	mance Data	
	2004	2005	2006	2007	2008
Annual Performance Objective			3	1	1
Annual Indicator			3	3	4
Numerator			3	3	4
Denominator	1	1	1	1	1
Data Source					CMCHdatabase
Is the Data Provisional or Final?				Final	Final
		Annual O	bjective and Perfor	mance Data	
	2009	2010	2011	2012	2013
Annual Performance Objective	1	1	1	1	1
Annual Indicator Numerator Denominator	Please fill in only the not required for future	ne Objectives for the alure year data.	bove years. Numerat	or, Denominator and a	Annual Indicators are

1. Section Number: Form11\_State Performance Measure #10
Field Name: SM10
Row Name:
Column Name:
Year: 2008
Field Note:
Source: Center for Maternal and Child Health Database

# FORM 12 TRACKING HEALTH OUTCOME MEASURES [SECS 505 (A)(2)(B)(III) AND 506 (A)(2)(A)(III)] STATE: MD

Form Level Notes for Form 12

OUTCOME MEASURE # 01					
The infant mortality rate per 1,000 live births.					
		<u>Annua</u>	I Objective and Perfo	rmance Data	
	2004	2005	2006	2007	2008
Annual Performance Objective	8.3	8.3	8.2	8.2	8
Annual Indicator	8.5	7.3	3 7.9	8.0	8.0
Numerator	632	545	615	623	623
Denominator	74,500	74,880	77,430	78,054	78,054
Data Source					MD Vital Statistics 2007
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2.The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional
		Annua	Il Objective and Perfo	rmance Data	
	2009	2010	2011	2012	2013
Annual Performance Objective	8		7.9	7.9	
Annual Indicator Numerator Denominator	Place fill in only th		e above years. Numera	ator, Denominator and	Annual Indicators are

# **Field Level Notes**

1. Section Number: Form12\_Outcome Measure 1 Field Name: OM01 Row Name:

Column Name: Year: 2007 Field Note:

Source: Maryland Vital Statistics Adm., Preliminary Report for 2007.

	Annual Objective and Performance Data							
	2004	2005	2006	2007	2008			
Annual Performance Objective	2.5	2.5	2.5	2.5	2.5			
Annual Indicator	2.7	2.7	2.2	3.0	3.0			
Numerator	14.9	12.7	12.7	14	14			
Denominator	5.6	4.7	5.7	4.6	4.6			
Data Source					MD Vital Statistic 2007			
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  (Explain data in a year note. See Guidance, Appendix IX.)								
Is the Data Provisional or Final?				Final	Provisional			
		Annual (	Objective and Perfor	mance Data				
	2009	2010	2011	2012	2013			
		2.4	2.3	2.3				

1. Section Number: Form12\_Outcome Measure 2
Field Name: OM02
Row Name:
Column Name:
Year: 2008
Field Note:
MD Vital Statistics 2007

2. Section Number: Form12\_Outcome Measure 2
Field Name: OM02
Row Name:
Column Name:
Year: 2007
Field Note:
MD Vital Statistics 2007

OUTCOME MEASURE # 03					
The neonatal mortality rate per 1,000 live births.					
		Annual (	Objective and Perfor	mance Data	
	2004	2005	2006	2007	2008
Annual Performance Objective	6	6	6	5.2	5.2
Annual Indicator	6.1	5.3	5.8	5.8	5.8
Numerator	452	394	446	451	451
Denominator	74,500	74,880	77,430	78,054	78,054
Data Source					Md Vital Statistic 2007
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Final	Provisional
		Annual C	Objective and Perfor	mance Data	
	2009	2010	2011	2012	2013
Annual Performance Objective	5.1	5.1	5.1	5.1	
Annual Indicator Numerator Denominator	Please fill in only the not required for fut-	he Objectives for the a ure year data.	above years. Numera	tor, Denominator and	Annual Indicators

1. Section Number: Form12\_Outcome Measure 3
Field Name: OM03
Row Name:
Column Name:
Year: 2008
Field Note:
2007 Maryland Vital Statistics Data

2. Section Number: Form12\_Outcome Measure 3 Field Name: OM03

Row Name: Column Name: Year: 2007 Field Note:

Source: 2007 Maryland Vital Statistics Report.

OUTCOME MEASURE # 04					
The postneonatal mortality rate per 1,000 live births.					
		<u>Annual</u>	Objective and Perfor	mance Data	
	2004	2005	2006	2007	2008
Annual Performance Objective	2.3	2.3	2.3	2.3	2.2
Annual Indicator	2.4	2.0	2.2	2.2	
Numerator	180	151	169	171	
Denominator	74,500	74,880	77,430	78,054	
Data Source					
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  (Explain data in a year note. See Guidance, Appendix IX.)					
Is the Data Provisional or Final?				Provisional	
		Annual	Objective and Perfor	mance Data	
	2009	2010	2011	2012	2013
Annual Performance Objective	2.2	2.1	2.1	2.1	
Annual Indicator Numerator Denominator	Please fill in only the not required for fut-		above years. Numera	tor, Denominator and	Annual Indicators are

None

OUTCOME MEASURE # 05					
The perinatal mortality rate per 1,000 live births plus fetal deaths.					
		Annual C	Objective and Perfor	mance Data	
	2004	2005	2006	2007	2008
Annual Performance Objective	14.1	14.1	7.9	7.3	8.2
Annual Indicator	7.9	7.4	8.4	8.4	8.4
Numerator	595	562	654	654	654
Denominator	75,502	75,512	77,430	77,430	77,430
Data Source Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  (Explain data in a year note. See Guidance, Appendix IX.)  Is the Data Provisional or Final?				Final	MD Vital Statistics  Provisional
	2009	Annual Objective and Performance Data 2010 2011 2012 2013			
Annual Performance Objective	8.2	8.1	8.1	8.1	8.1
Annual Indicator Numerator	Please fill in only the		above years. Numera	tor, Denominator and	Annual Indicators are

Denominator

# Field Level Notes

1. Section Number: Form12\_Outcome Measure 5
Field Name: OM05
Row Name:
Column Name:
Year: 2008
Field Note:
2007 Manyland Vital Statistics Data

2007 Maryland Vital Statistics Data

2. Section Number: Form12\_Outcome Measure 5 Field Name: OM05

Row Name: Column Name: Year: 2007

Field Note: 2007 Maryland Vital Statistics Data

OUTCOME MEASURE # 06					
The child death rate per 100,000 children aged 1 through 14.					
The office dealth ate per 100,000 officers aged 1 amough 11.		Annual C	Objective and Perform	mance Data	
	2004	2005	2006	2007	2008
Annual Performance Objective	22.5	22.5	21.4	21.3	17.5
Annual Indicator	21.5	16.4	17.9	17.9	
Numerator	232	177	186	186	
Denominator	1,077,913	1,077,913	1,038,851	1,038,851	
Data Source					
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  (Explain data in a year note. See Guidance, Appendix IX.)	! !				
Is the Data Provisional or Final?				Provisional	
		Annual C	Objective and Performance Data		
	2009	2010	2011	2012	2013
Annual Performance Objective	17.5	17.4	17.4	17.4	
Annual Indicator Numerator Denominator	Please fill in only the not required for futi	ne Objectives for the a ure year data.	bove years. Numerat	or, Denominator and	Annual Indicators are

1. Section Number: Form12\_Outcome Measure 6
Field Name: OM06
Row Name:
Column Name:
Year: 2007
Field Note:
Source: 2006 Maryland Vital Statistics Report. Estimate based on 2006 rate. Data for 2007 is currently unavailable.

STATE OUTCOME MEASURE # 1							
Adolescent and Young Adult Death Rate per 100,000 aged 15-24							
			Annual C	bjective and Perfor	mance Data		
	2004	2005		2006	2007	2008	
Annual Performance Objective				-			
Annual Indicator					69,400.0	69,400.0	
Numerator					546,171	546,171	
Denominator					786,990	786,990	
Data Source						MD Vital Statistics 2007	
Is the Data Provisional or Final?					Final	Final	
			Annual C	Objective and Perfori	Performance Data		
	2009	2010		2011	2012	2013	
Annual Performance Objective	69,400		69,400	69,400	69,400	69,400	
Annual Indicator Numerator Denominator	Please fill in only the not required for future.			bove years. Numerat	or, Denominator and	Annual Indicators are	

 Section Number: Form12\_State Outcome Measure 1
 Field Name: SO1
 Row Name:
 Column Name: Year: 2008

Field Note: 2007 Mryland Vital Statistics Report

2. Section Number: Form12\_State Outcome Measure 1
Field Name: SO1
Row Name:
Column Name:

Year: 2007 Field Note: 2007 Maryland Vital Statistics Report

# CHARACTERISTICS DOCUMENTING FAMILY PARTICIPATION IN CSHCN PROGRAMS STATE: MD 1. Family members participate on advisory committee or task forces and are offering training, mentoring, and reimbursement, when appropriate. 3 2. Financial support (financial grants, technical assistance, travel, and child care) is offered for parent activities or parent groups. 3 3. Family members are involved in the Children with Special Health Care Needs elements of the MCH Block Grant Application process. 2 4. Family members are involved in service training of CSHCN staff and providers. 2 5. Family members hired as paid staff or consultants to the State CSHCN program (a family member is hired for his or her expertise as a family member). 1 6. Family members of diverse cultures are involved in all of the above activities. 2 Total Score: 13 Rating Key 0 = Not Met 1 = Partially Met 2 = Mostly Met 3 = Completely Met

# FORM NOTES FOR FORM 13

None

# FIELD LEVEL NOTES

1. Section Number: Form13\_Main

Field Name: Question5

Row Name: #5. Family members hired as paid staff or consultants to the State CSHCN program...

Column Name: Year: 2010 Field Note:

We have lost Ms Mary Ann Kane- Breschi, the mother of a special needs child, who served as a CSHCN resources coordinator, but we hope she will return part time. Ms Terry, the mother of 2 special needs infants, is still with the OGCSHCN. Ms Terry is a nurse and is chief of the birth defects program.

# FORM 14 LIST OF MCH PRIORITY NEEDS

[Sec. 505(a)(5)]

**STATE: MD FY: 2010** 

Your State's 5-year Needs Assessment should identify the need for preventive and primary care services for pregnant women, mothers, and infants; preventive and primary care services for children and services for Children with Special Health Care Needs. With each year's Block Grant application, provide a list (whether or not the priority needs change) of the top maternal and child health needs in your state. Using simple sentence or phrase ,list below your State's needs. Examples of such statements are: "To reduce the barriers to the delivery of care for pregnant women, " and "The infant mortality rate for minorities should be reduced."

MCHB will capture annually every State's top 7 to 10 priority needs in an information system for comparison, tracking, and reporting purposes; you must list at least 7 and no more than 10. Note that the numbers listed below are for computer tracking only and are not meant to indicate priority order. If your State wishes to report more than 10 priority needs, list additional priority needs in a note at the form level.

- 1. To eliminate racial and ethnic disparities in maternal and child health.
- 2. To promote healthy pregnancies and healthy pregnancy outcomes.
- 3. To promote optimal family functioning.
- 4. To promote healthy children.
- 5. To promote healthy adolescents and young adults.
- 6. To promote healthy nutrition and physical activity across the lifespan.
- 7. To improve systems of care for children with special health care needs.
- 8. To improve systems of care for women, children and families by strengthening the infrastructure for maternal and child health services and activities.
- 9.
- 10.

FORM NOTES FOR FORM 14
None

FIELD LEVEL NOTES

None

# FORM 15 TECHNICAL ASSISTANCE(TA) REQUEST

STATE: MD APPLICATION YEAR: 2010

No.	Category of Technical Assistance Requested	Description of Technical Assistance Requested (max 250 characters)	Reason(s) Why Assistance Is Needed (max 250 characters)	What State, Organization or Individual Would You suggest Provide the TA (if known) (max 250 characters)
	Other If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here: N/A	None at this time	None at this time	None at this time
2.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here:			
	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here:			
4.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here:			
5.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here:			
6.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here:			
	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here:			
8.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here:			
9.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here:			
10.	If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the			

measure number here:		
If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here:		
If you selected State or National Performance Measure Issue categories above, identify the performance measure to which this issue pertains by entering the measure number here:		

FORM NOTES FOR FORM 15
None

FIELD LEVEL NOTES

None

# FORM 16 STATE PERFORMANCE AND OUTCOME MEASURE DETAIL SHEET STATE: MD

SP # 1

PERFORMANCE MEASURE: Percent of pregnancies that are intended

STATUS: Active

GOAL Reduce the percentage of unintended pregnancies

**DEFINITION** Percent of PRAMS respondents who report that their pregnancies were intended.

Numerator:

Number of PRAMS respondents indicating that their pregnancy was unintended in the calendar

Denominator:

Number of PRAMS respondents in the calendar year

Units: 100 Text: Percent

HEALTHY PEOPLE 2010 OBJECTIVE Reduce rate of unintended pregnancy to 30%

DATA SOURCES AND DATA ISSUES PRAMS Survey

SIGNIFICANCE

Unintended pregnancies are pregnancies that are mistimed or unwanted. Unintended pregnancy is a widespread problem

that can have serious consequences for both the mother and baby. Children of unintended pregnancies are more likely to born at low birth weight, to die before their first birthday, to be abused or to not receive sufficient resources for healthy

development.

SP# 2

PERFORMANCE MEASURE: Percent of women reporting alcohol use in the last three months of pregnancy

STATUS: Acti

GOAL Eliminate alcohol use during pregnancy

**DEFINITION** Percent of women reporting alcohol use in the last three months of pregnancy

Numerator

Number of women who report using alcohol during the last three months of pregnancy in the calendar year

Denominator:

Number of pregnant women (live births)

Units: 100 Text: Percent

HEALTHY PEOPLE 2010 OBJECTIVE 94% of women to abstain from alcohol use during pregnancy; 100% to abstain from binge drinking

**DATA SOURCES AND DATA ISSUES** 

PRAMS Survey; Maryland Vital Statistics data

**SIGNIFICANCE** 

Alcohol use during pregnancy is considered to be the leading cause of preventable birth defects and retardation in the U.S. Fetal Alcohol Spectrum Disorders (FASD) encompasses the range of adverse effects that can result from alcohol exposure. The consequences of FASD are life long and can include learning disabilities, mental health problems and developmental

isabilities.

PERFORMANCE MEASURE: Percent of Maryland kindergartners entering school ready to learn

STATUS: Active

GOAL Increase the number of children entering school ready to learn

**DEFINITION** 

**Numerator:**Number of kindergarteners successfully completing the state's measure of school readiness

Denominator:

Number of kindergarteners tested Units: 100 Text: Percent

**HEALTHY PEOPLE 2010 OBJECTIVE** 

**DATA SOURCES AND DATA ISSUES** 

Maryland Department of Education's Model for School Readiness, Work Sampling System

**SIGNIFICANCE** 

Recent neuro-scientific research strongly supports the belief that young children's learning before they enter school is an essential foundation for later school success. Maryland has developed an assessment tool for measuring school readiness according to seven domains, including physical development and health.

PERFORMANCE MEASURE: Rate of emergency department visits for asthma per 10,000 children, ages 0-4

STATUS: Active

GOAL Reduce asthma morbidity among Maryland children due to improper asthma control and management

**DEFINITION** Rate of emergency department visits for asthma per 10,000 children, ages 0-4

**Numerator:**Number of emergency department visits in calendar year among children ages 0-4

**Denominator:** Number of children ages 0-4 Units: 10000 Text: Rate

**HEALTHY PEOPLE 2010 OBJECTIVE** 

No more than 80 visits per 10,000 population

**DATA SOURCES AND DATA ISSUES** 

Maryland Asthma Surveillance System

SIGNIFICANCE

Asthma is a leading cause of childhood morbidity. Emergency department visit rates are highest for children aged 0-4. Many emergency visits are avoidable with appropriate preventive and therapeutic care.

PERFORMANCE MEASURE: Percent of Maryland 12th graders who graduate from high school

STATUS: Active

GOAL Increase the percentage of Maryland 12th graders completing high school during the school year

**DEFINITION** Percentage of Maryland 12th graders who graduate from high school

**Numerator:**Number of 12th graders who complete the twelfth grade during the school year

Denominator:

Number of 12th graders enrolled in public high schools

Units: 100 Text: Percent

**HEALTHY PEOPLE 2010 OBJECTIVE** 

**DATA SOURCES AND DATA ISSUES** 

Maryland State Department of Education Database

**SIGNIFICANCE** 

Adolescents who fail to complete high school are a greater risk for a number of negative outcomes in life, many of the linked to socio-economic status. They are more likely to have lower lifetime earnings, more likely to become involved in crime, and more likely to unemployed. Lower income is also correlated with poorer health status.

Percentage of local jurisdictions addressing the issue of respite for families of CSHCN **PERFORMANCE MEASURE:** 

STATUS: Active

GOAL To increase access to respite services by all families of CSHCN in the State

**DEFINITION** 

**SIGNIFICANCE** 

**Numerator:** Number of local health departments offering respite services

Denominator:

Number of local health departments

Units: 100 Text: Percent

**HEALTHY PEOPLE 2010 OBJECTIVE** 

The Office for Genetics and CSHCN will supply data for this measure. Other measures to be explored include: Number of CSHCN grants to local jurisdictions Number of respite providers trained Number of families receiving respite services **DATA SOURCES AND DATA ISSUES** 

A number of needs assessments through local health departments, Infants and Toddlers programs, health providers and parent groups have identified respite care as the most important unmet service need for families of CSHCN.

**PERFORMANCE MEASURE:** Percent of mothers breastfeeding at six months

STATUS: Active

GOAL Increase the percentage of Maryland mothers continuing to breastfeed at six months

**DEFINITION** 

**Numerator:**Number of mothers reporting continuing to breastfeed at six months postpartum

Denominator:

Number of mothers in the reporting period

Units: 100 Text: Percent

**HEALTHY PEOPLE 2010 OBJECTIVE** 

Fifty percent of mothers breastfeeding at six months.

**DATA SOURCES AND DATA ISSUES** 

Several databases will be consulted included PRAMS, the National Immunization Survey, and the Ross Survey

SIGNIFICANCE

Human milk is the most optimal form of nutrition for infants through the first six months of life according to the American Academy of Pediatrics. Breastfeeding offers numerous nutritional and health benefits for both mothers and babies.

PERFORMANCE MEASURE: Percent of local jurisdictions with written plans to address racial and ethnic disparities in maternal and child health

STATUS: Active

GOAL Eliminate disparities in maternal and child health

**DEFINITION** 

**Numerator:** Number of jurisdictions with plans to address disparties in maternal and child health

Denominator:

Number of jurisdictions in the state

Units: 100 Text: Percent

**HEALTHY PEOPLE 2010 OBJECTIVE** 

Eliminate health disparities

**DATA SOURCES AND DATA ISSUES** 

Center for Maternal and Child Health Data files

SIGNIFICANCE

Racial and ethnic minorities, particularly African Americans, suffer from higher levels of mortality and morbidity than Caucasian Americans as measured by a number of MCH indicators. This disparities often represent inequities and they

must be eradicated.

PERFORMANCE MEASURE: Percent of jurisdictions that partner with medical homes to develop and to disseminate resource materials.

STATUS: Active

GOAL Improve access to care for CSHCN

**DEFINITION** 

**Numerator:** Number of jurisdictions disseminating resource guides to families of CSHCN

Denominator:

Number of jurisdictions Units: 100 Text: Percent

**HEALTHY PEOPLE 2010 OBJECTIVE** 

**DATA SOURCES AND DATA ISSUES** 

Office for Genetics and Children with Special Health Care Needs files

SIGNIFICANCE

This is a developmental measure which seeks to measure local ability to provide "consumer friendly" resource information to families of CSHCN. Many families of CSHCN often find it difficult to navigate the service system and could use resource

information to guide them.

PERFORMANCE MEASURE: Number of policy or issue briefs developed by the Title V program

STATUS: Active

GOAL To improve Title V capacity to analyze and translate data

**DEFINITION** Number of policy or issue briefs developed by the Title V program

**Numerator:** The Title V Program completes at least one policy brief during the fiscal year.

Denominator: Number completed Units: 1 Text: Scale

**HEALTHY PEOPLE 2010 OBJECTIVE** 

**DATA SOURCES AND DATA ISSUES** Title V Program files

SIGNIFICANCE This is a developmental measure has to do with improving the state's capacity to analyze data and formulate maternal and

child health policy.

SO# 1

**OUTCOME MEASURE:** Adolescent and Young Adult Death Rate per 100,000 aged 15-24

STATUS: Active

GOAL Reduce preventable deaths occuring to adolescents and young adults between the ages of 15 and 24 in Maryland

**DEFINITION** 

Numerator: Number of deaths to adolescent and young adults between the ages of 15 and 24 during the calendar year

Number of adolescents and young adults between the ages of 15 and 24 during the calendar year

Units: 100000 Text: Rate

**HEALTHY PEOPLE 2010 OBJECTIVE** 

**DATA SOURCES AND DATA ISSUES** Maryland Vital Statistics and Child Fatality Review Reports

SIGNIFICANCE Many adolescent and young adult deaths result from preventable injuries and other causes. FORM NOTES FOR FORM 16
None

FIELD LEVEL NOTES

None

### FORM 17

### HEALTH SYSTEMS CAPACITY INDICATORS FORMS FOR HSCI 01 THROUGH 04, 07 & 08 - MULTI-YEAR DATA STATE: MD

Form Level Notes for Form 17

None

#### HEALTH SYSTEMS CAPACITY MEASURE # 01

The rate of children hospitalized for asthma (ICD-9 Codes: 493.0 -493.9) per 10,000 children less than five years of age.

The Tate of Children Hospitalized for astrillia (ICD-9 Codes, 493.0 -496	3.3) per 10,000 cililai	en less than live yea	is of age.		
			<b>Annual Indicator Da</b>	<u>ata</u>	
	2004	2005	2006	2007	2008
Annual Indicator	41.5	34.2	35.4	44.9	44.9
Numerator	1,556	1,303	1,303	1,681	1,681
Denominator	374,578	381,487	368,199	374,133	374,133
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied (Explain data in a year note. See Guidance, Appendix IX.  Is the Data Provisional or Final?				Final	Provisional

#### Field Level Notes

Section Number: Form17\_Health Systems Capacity Indicator #01 Field Name: HSC01

Field Name: HS Row Name: Column Name: Year: 2007 Field Note:

Source: HSCRC Hospital data and ambulator data, NCHS Vintage 2007 Population File.

2. Section Number: Form17\_Health Systems Capacity Indicator #01 Field Name: HSC01

Field Name: HSC Row Name: Column Name: Year: 2006 Field Note:

Source: Hospitalizations - MD Hospital Discharge Database, 2006; Population - MD Vital Statistics Population estimates for 2006.

			Annual Indicator Da	<u>ata</u>	
	2004	2005	2006	2007	2008
Annual Indicator	85.7	85.9	86.0	87.9	84.1
Numerator	27,838	28,799	30,488	32,206	31,844
Denominator	32,491	33,517	35,450	36,639	37,842
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  (Explain data in a year note. See Guidance, Appendix IX.)  Is the Data Provisional or Final?				Provisional	Final

Section Number: Form17\_Health Systems Capacity Indicator #02 Field Name: HSC02

Field Name: HSC0: Row Name: Column Name: Year: 2008 Field Note:

Source: Medicaid data for Federal Fiscal Year 2008

 Section Number: Form17\_Health Systems Capacity Indicator #02 Field Name: HSC02

Field Name: HSC0 Row Name: Column Name: Year: 2007 Field Note:

Year: 2007
Field Note:
Source: Maryland Medicaid Program. Defined as those born between 1/1/7 - 9/30/07. Initial periodic screen defined as CPT code 99381; 99391; 99341 or diagnosis codes starting with v20.2; v77.0; v77.9; v78.0-v78.9.

### **HEALTH SYSTEMS CAPACITY MEASURE # 03**

The percent State Childrens Health Insurance Program (SCHIP) enrollees whose age is less than one year during the reporting year who received at least one periodic screen.

	Annual Indicator Data				
	2004	2005	2006	2007	2008
Annual Indicator	73.3	73.3	52.6	83.9	85.3
Numerator	r211	211	201	433	1,119
Denominator	288	288	382	516	1,312
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX. Is the Data Provisional or Final?				Provisional	Final

#### **Field Level Notes**

1. Section Number: Form17\_Health Systems Capacity Indicator #03

Field Name: HSC03 Row Name: Column Name: Year: 2008 Field Note:

Source: Medicaid data for Federal Fiscal Year 2008.

2. Section Number: Form17\_Health Systems Capacity Indicator #03

Field Name: HSC03 **Row Name:** Column Name: Year: 2007 Field Note:

Source: Maryland Medicaid program data for FFY 2007. Infants defined as those born between 10/1/07 to 9/30/07.

#### **HEALTH SYSTEMS CAPACITY MEASURE # 04**

The percent of women (15 through 44) with a live birth during the reporting year whose observed to expected prenatal visits are greater than or equal to 80 percent on the Kotelchuck Index.

	Annual Indicator Data				
	2004	2005	2006	2007	2008
Annual Indicator	70.1	70.1	69.4	69.7	69.7
Numerator	52,224	52,491	53,712	54,389	54,389
Denominator	74,500	74,880	77,430	78,057	78,057
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  (Explain data in a year note. See Guidance, Appendix IX.) Is the Data Provisional or Final?				Final	Provisional

#### **Field Level Notes**

Section Number: Form17\_Health Systems Capacity Indicator #04 Field Name: HSC04

Field Name: HSC04 Row Name: Column Name: Year: 2008 Field Note:

2008 data not available. Derived from Vital Statistics Administration data, 2007.

2. Section Number: Form17\_Health Systems Capacity Indicator #04

Field Name: HSC04 Row Name: Column Name: Year: 2007 Field Note:

Derived from Vital Statistics Administration Data, 2007.

3. Section Number: Form17\_Health Systems Capacity Indicator #04

Field Name: HSC04 Row Name: Column Name: Year: 2006 Field Note:

Derived from VItal Statistics Administration data, 2006

HEALTH SYSTEMS CAPACITY MEASURE # 07A  Percent of potentially Medicaid-eligible children who have received a service paid by the Medicaid Program.					
			Annual Indicator Da	ata	
	2004	2005	2006	2007	2008
Annual Indicator	78.9	79.5	80.7	83.6	83.8
Numerator	317,803	321,369	324,114	317,571	333,454
Denominator	402,825	404,286	401,816	379,937	397,848
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  (Explain data in a year note. See Guidance, Appendix IX.					
Is the Data Provisional or Final?				Final	Provisional

Section Number: Form17\_Health Systems Capacity Indicator #07A
 Field Name: HSC07A
 Roy New York

Row Name: Column Name: Year: 2008 Field Note:

Source: Medicaid data for Federal Fiscal Year 2008.

2. Section Number: Form17\_Health Systems Capacity Indicator #07A Field Name: HSC07A

Row Name: Column Name:
Year: 2007
Field Note:
Source: Medicaid data for Federal Fiscal Year 2007.

			<b>Annual Indicator Da</b>	<u>nta</u>	
	2004	2005	2006	2007	2008
Annual Indicator	48.7	48.7	51.6	46.7	50.7
Numerator	28,071	28,071	32,065	44,600	52,569
Denominator	57,589	57,589	62,166	95,464	103,645
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  (Explain data in a year note. See Guidance, Appendix IX.)  Is the Data Provisional or Final?				Final	Provisional

1. Section Number: Form17\_Health Systems Capacity Indicator #07B

Field Name: HSC07B Row Name: Column Name: Year: 2008 Field Note:

Source: Medicaid data for Federal Fiscal Year 2008.

Section Number: Form17\_Health Systems Capacity Indicator #07B

Field Name: HSC07B **Row Name:** Column Name: Year: 2007 Field Note:

Source: Maryland Medicaid Program, calendar year 2007. Age as of 1/1/07.

3. Section Number: Form17\_Health Systems Capacity Indicator #07B

Field Name: HSC07B Row Name: Column Name: Year: 2006 Field Note:

Source: Maryland Medicaid Program. In calendar year 2006, there were 62,166 children enrolled in HealthChoice managed care organizations for at least 320 days. 32,065

of these children had at least one dental visit.

#### **HEALTH SYSTEMS CAPACITY MEASURE # 08**

The percent of State SSI beneficiaries less than 16 years old receiving rehabilitative services from the State Children with Special Health Care Needs (CSHCN) Program.

	Annual Indicator Data				
	2004	2005	2006	2007	2008
Annual Indicator	0.0	0.0	0.0	0.0	0.0
Numerator	0	0	0	0	0
Denominator	12,246	14,720	15,275	13,246	13,575
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied. (Explain data in a year note. See Guidance, Appendix IX.)			Yes	Yes	Yes_
Is the Data Provisional or Final?				Final	Final

#### **Field Level Notes**

1. Section Number: Form17\_Health Systems Capacity Indicator #08

Field Name: HSC08 Row Name: Column Name: Year: 2008 Field Note:

This annual indicator is in fact zero. The Children's Medical Services Program (CMS) does not pay for care for SSI/ MA eligible children if the needed service is covered by Medicaid.

CMS will pay for needed specialty care services that are not provided by Medicaid.

The OGCSHCN is currently only able to track this data in the Children's Medical Services Program (CMS) and only two SSI benficiaries less than 16 years of age are on the CMS eligibility list, both received services from CMS in 2007 but neither received services from CMS in 2008. Denominator data is the number of Maryland SSI beneficiaries under 16 years of age as of December 2008 from the Social Security Administration.

2. Section Number: Form17\_Health Systems Capacity Indicator #08

Field Name: HSC08 Row Name: Column Name: Year: 2007 Field Note:

This annual indicator is zero. The OGCSHCN is currently only able to track this data in the Children's Medical Services Program, and only two SSI benficiaries less than 16 years of age received services from this program in 2007. Denominator data is the number of Maryland SSI beneficiaries under 16 years of age as of December 2007 from the Social Security Administration.

3. Section Number: Form17\_Health Systems Capacity Indicator #08

Field Name: HSC08 Row Name: Column Name: Year: 2006 Field Note:

This annual indicator is in fact zero. The Title V CSHCN program does not want to pay for care for SSI benficiaries when they can receive this care through Medicaid. Denominator data is the number of Maryland children ages 0-17 receiving SSI as of December 2006 from the Social Security Administartion.

# FORM 18 HEALTH SYSTEMS CAPACITY INDICATOR #05 (MEDICAID AND NON-MEDICAID COMPARISON) STATE: MD

INDICATOR #05 Comparison of health system capacity				POPULATION	
indicators for Medicaid, non-Medicaid, and all MCH populations in the State	YEAR	DATA SOURCE	MEDICAID	NON-MEDICAID	ALL
a) Percent of low birth weight (< 2,500 grams)	2007	Payment source from birth certificate	10.8	8.3	9.1
b) Infant deaths per 1,000 live births	2007	Payment source from birth certificate	8.7	7.3	7.8
c) Percent of infants born to pregnant women receiving prenatal care beginning in the first trimester	2007	Payment source from birth certificate	67.8	85.3	79.5
d) Percent of pregnant women with adequate prenatal care(observed to expected prenatal visits is greater than or equal to 80% [Kotelchuck Index])	2007	Payment source from birth certificate	60	76.2	69.7

### FORM 18 HEALTH SYSTEMS CAPACITY INDICATOR #06(MEDICAID ELIGIBILITY LEVEL) STATE: MD

INDICATOR #06 The percent of poverty level for eligibility in the State's Medicaid programs for infants (0 to 1), children, Medicaid and pregnant women.	YEAR	PERCENT OF POVERTY LEVEL MEDICAID (Valid range: 100-300 percent)
a) Infants (0 to 1)	2008	300
b) Medicaid Children (Age range 1 to 19 ) (Age range to ) (Age range to )	2008	300
c) Pregnant Women	2008	250

### FORM 18 HEALTH SYSTEMS CAPACITY INDICATOR #06(SCHIP ELIGIBILITY LEVEL) STATE: MD

INDICATOR #06 The percent of poverty level for eligibility in the State's SCHIP programs for infants (0 to 1), children, SCHIP and pregnant women.	YEAR	PERCENT OF POVERTY LEVEL SCHIP
a) Infants (0 to 1)	2008	300
b) Medicaid Children (Age range 1 to 19 ) (Age range to ) (Age range to )	2008	300
c) Pregnant Women	2008	250

#### FORM NOTES FOR FORM 18

#### FIELD LEVEL NOTES

Section Number: Form18\_Indicator 06 - Medicaid

Field Name: Med\_Infant Row Name: Infants Column Name: Year: 2010 Field Note: State FY 2009/2010

Coverage is based on a sliding scale covers 200% to 300% FPL.

Note: May include a fee for service.

Section Number: Form18 Indicator 06 - Medicaid

Field Name: Med\_Children Row Name: Medicaid Children Column Name:

Year: 2010 Field Note: State FY 2009/2010

Coverage is based on a sliding scale covers 200% to 300% FPL.

Note: May include a fee for service.

Section Number: Form18\_Indicator 06 - Medicaid

Field Name: Med\_Women Row Name: Pregnant Women

Column Name: Year: 2010 Field Note: State FY 2009/2010

Coverage is based on a sliding scale covers 200% to 300% FPL.

Note: May include a fee for service.

Section Number: Form18\_Indicator 06 - SCHIP

Field Name: SCHIP\_Infant Row Name: Infants Column Name: Year: 2010 Field Note:

State FY 2009/2010

Coverage is based on a sliding scale covers 200% to 300% FPL.

Note: May include a fee for service.

Section Number: Form18\_Indicator 06 - SCHIP Field Name: SCHIP\_Children Row Name: SCHIP Children

Column Name: Year: 2010 Field Note: State FY 2009/2010

Coverage is based on a sliding scale covers 200% to 300% FPL.

Note: May include a fee for service.

Section Number: Form18\_Indicator 06 - SCHIP

Field Name: SCHIP\_Women Row Name: Pregnant Women

Column Name: Year: 2010 Field Note:

State FY 2009/2010

Coverage is based on a sliding scale covers 200% to 300% FPL.

Note: May include a fee for service.

Section Number: Form18\_Indicator 05

Field Name: InfantDeath

Row Name: Infant deaths per 1,000 live births

Column Name: Year: 2010 Field Note:

Based on Vital Statistics Administration Linked Birth-Death File for deaths in 2007.

#### **FORM 19** HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM STATE: MD

HEALTH SYSTEMS CAPACITY INDICATOR #09A (General MCH Data Capacity)
(The Ability of the State to Assure MCH Program Access to Policy and Program Relevant Informatioin)

	Description MOII and annual beautiful to ability to ability	
DATABASES OR SURVEYS	Does your MCH program have the ability to obtain data for program planning or policy purposes in a timely manner?  (Select 1 - 3) *	Does your MCH program have Direct access to the electronic database for analysis? (Select Y/N)
ANNUAL DATA LINKAGES Annual linkage of infant birth and infant death certificates	3	Yes
Annual linkage of birth certificates and Medicaid Eligibility or Paid Claims Files	2	No
Annual linkage of birth certificates and WIC eligibility files	1	No
Annual linkage of birth certificates and newborn screening files	3	Yes
REGISTRIES AND SURVEYS Hospital discharge survey for at least 90% of in-State discharges	3	Yes
Annual birth defects surveillance system	3	Yes
Survey of recent mothers at least every two years (like PRAMS)	3	Yes

- 1 = No, the MCH agency does not have this ability.
  2 = Yes, the MCH agency sometimes has this ability, but not on a consistent basis.
  3 = Yes, the MCH agency always has this ability.

#### **FORM 19** HEALTH SYSTEMS CAPACITY INDICATOR - REPORTING AND TRACKING FORM STATE: MD

DATA SOURCES	Does your state participate in the YRBS survey? (Select 1 - 3)*	Does your MCH program have direct access to the state YRBS database for analysis? (Select Y/N)		
Youth Risk Behavior Survey (YRBS)	3	Yes		
Other:				

#### \*Where:

1 = No

- 2 = Yes, the State participates but the sample size is <u>not</u> large enough for valid statewide estimates for this age group. 3 = Yes, the State participates and the sample size is large enough for valid statewide estimates for this age group.

1. HEALTH SYSTEMS CAPACITY INDICATOR #09B was formerly reported as Developmental Health Status Indicator #05.

FORM NOTES FOR FORM 19
None

FIELD LEVEL NOTES

None

# FORM 20 HEALTH STATUS INDICATORS #01-#05 MULTI-YEAR DATA STATE: MD

#### Form Level Notes for Form 11

None

HEALTH STATUS INDICATOR MEASURE # 01A							
The percent of live births weighing less than 2,500 grams.							
	Annual Indicator Data						
	2004	2005	2006	2007	2008		
Annual Indicator	9.4	9.2	9.4	9.1	9.1		
Numerator	6,992	6,869	7,294	7,133	7,133		
Denominator	74,500	74,880	77,430	78,057	78,057		
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  (Explain data in a year note. See Guidance, Appendix IX.							
Is the Data Provisional or Final?	•			Final	Provisional		

#### **Field Level Notes**

1. Section Number: Form20\_Health Status Indicator #01A Field Name: HSI01A

Field Name: HS Row Name: Column Name: Year: 2008 Field Note:

2008 data not available. Estimate taken from 2007 Vital Statistics Administration data.

2. Section Number: Form20\_Health Status Indicator #01A Field Name: HSI01A

Field Name: HSIO Row Name: Column Name: Year: 2006 Field Note:

2006 data is not available. Estimate is based on 2005 data.

HEALTH STATUS INDICATOR MEASURE # 01B						
The percent of live singleton births weighing less than 2,500 grams.						
	Annual Indicator Data					
	2004	2005	2006	2007	2008	
Annual Indicator	7.3	7.2	7.3	7.2	7.2	
Numerator	5,219	5,188	5,441	5,373	5,373	
Denominator	71,502	72,020	74,295	75,083	75,083	
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied (Explain data in a year note. See Guidance, Appendix IX. Is the Data Provisional or Final?				Final	Provisional	

Section Number: Form20\_Health Status Indicator #01B
 Field Name: HSI01B
 Pour Name: HSI01B

Row Name: Column Name: Year: 2008 Field Note:

Data for 2008 not available. Estimate taken from 2007 Vital Statistics Administration Data.

2. Section Number: Form20\_Health Status Indicator #01B Field Name: HSI01B

HEALTH STATUS INDICATOR MEASURE # 02A					
The percent of live births weighing less than 1,500 grams.					
			Annual Indicator Da	ata .	
	2004	2005	2006	2007	2008
Annual Indicator	2.1	1.9	1.9	1.9	1.9
Numerator	1,547	1,415	1,473	1,474	1,474
Denominator	74,500	74,880	77,430	78,057	78,057
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied (Explain data in a year note. See Guidance, Appendix IX. Is the Data Provisional or Final?				Final	Provisional

Section Number: Form20\_Health Status Indicator #02A
 Field Name: HSI02A
 Pour Name:

Row Name: Column Name: Year: 2008 Field Note:

Data for 2008 not available. Estimate based on 2007 Vital Statistics Administration data.

2. Section Number: Form20\_Health Status Indicator #02A Field Name: HSI02A

HEALTH STATUS INDICATOR MEASURE # 02B						
The percent of live singleton births weighing less than 1,500 grams.						
	Annual Indicator Data					
	2004	2005	2006	2007	2008	
Annual Indicator	1.6	1.5	1.5	1.5	1.5	
Numerator	1,179	1,064	1,095	1,090	1,090	
Denominator	71,502	72,020	74,283	75,083	75,083	
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  (Explain data in a year note. See Guidance, Appendix IX.) Is the Data Provisional or Final?				Final	Provisional	

Section Number: Form20\_Health Status Indicator #02B Field Name: HSI02B

Field Name: HSI021 Row Name: Column Name: Year: 2008 Field Note:

Year: 2008
Field Note:
Data for 2008 not available. Estimate based on 2007 Vital Statistics Administration data.

en aged 14 years ar	nd younger.					
Annual Indicator Data						
2004	2005	2006	2007	2008		
6.8	7.0	5.2	6.5	6.5		
78	81	58	72	72		
1,153,514	1,153,348	1,112,945	1,113,284	1,113,284		
			Final	Provisional		
	2004 6.8 78 1,153,514	6.8 7.0 78 81 1,153,514 1,153,348	Annual Indicator Day 2004 2005 2006  6.8 7.0 5.2 78 81 58 1,153,514 1,153,348 1,112,945	Annual Indicator Data 2004 2005 2006 2007 - 6.8 7.0 5.2 6.5 - 78 81 58 72 - 1,153,514 1,153,348 1,112,945 1,113,284		

Section Number: Form20\_Health Status Indicator #03A
 Field Name: HSI03A
 Pour Name:

Row Name: Column Name: Year: 2007 Field Note:

Source: 2006 Md. Vital Statistics Report. Data for 2007 is currently unavailable.

2. Section Number: Form20\_Health Status Indicator #03A Field Name: HSI03A

he death rate per 100,000 for unintentional injuries among children a	aged 14 years and yo	ounger due to motor	venicle crasnes.  Annual Indicator Da	ata	
	2004	2005	2006	2007	2008
Annual Indicator	3.4	2.4	2.5	2.8	2.8
Numerator	39	28	28	31	31
Denominator	1,153,514	1,153,348	1,112,945	1,113,284	1,113,284
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  (Explain data in a year note. See Guidance, Appendix IX.,  Is the Data Provisional or Final?				Final	Final

Section Number: Form20\_Health Status Indicator #03B
 Field Name: HSI03B
 Pour Name: HSI03B

Row Name: Column Name: Year: 2007 Field Note:

Source: 2006 Maryland Vital Statistics Report. Data for 2007 is currently unavailable.

2. Section Number: Form20\_Health Status Indicator #03B Field Name: HSI03B

HEALTH STATUS INDICATOR MEASURE # 03C					
The death rate per 100,000 from unintentional injuries due to motor v	ehicle crashes amon	g youth aged 15 thro	ough 24 years.		
			Annual Indicator Da	<u>ata</u>	
	2004	2005	2006	2007	2008
Annual Indicator	r 22.8	19.1	21.6	22.0	22.0
Numerator	r174	149	169	173	173
Denominator	r 762,496	781,675	780,609	786,990	786,990
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  (Explain data in a year note. See Guidance, Appendix IX. Is the Data Provisional or Final?	i r =			Final	Provisional

Section Number: Form20\_Health Status Indicator #03C
 Field Name: HSI03C
 Pour Name: HSI03C

Row Name: Column Name: Year: 2007 Field Note:

Source: 2006 Maryland Vital Statistics Report. Data for 2007 is currently unavailable.

2. Section Number: Form20\_Health Status Indicator #03C Field Name: HSI03C

HEALTH STATUS INDICATOR MEASURE # 04A					
The rate per 100,000 of all nonfatal injuries among children aged 14 y	ears and younger.				
			Annual Indicator Da	<u>ata</u>	
	2004	2005	2006	2007	2008
Annual Indicator	202.7	204.6	191.5	201.5	201.5
Numerator	2,338	2,360	2,131	2,232	2,232
Denominator	1,153,514	1,153,348	1,112,945	1,107,687	1,107,687
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  (Explain data in a year note. See Guidance, Appendix IX., Is the Data Provisional or Final?				Final	Provisional

1. Section Number: Form20\_Health Status Indicator #04A

Field Name: HSI04A Row Name: Column Name: Year: 2008 Field Note:

Estimate based on 2007 data. Hospital discharge data for 2008 not yet available.

2. Section Number: Form20\_Health Status Indicator #04A

Field Name: HSI04A Row Name: Column Name: Year: 2007 Field Note:

Data Source: HSCRC Hospital Discharge Dataset for 2007, MDP population estimate for 2007. Excludes Ecodes E870-E879, E930-E949 (adverse event injuries due to medical, surgical, drugs).

3. Section Number: Form20\_Health Status Indicator #04A

Field Name: HSI04A Row Name: Column Name: Year: 2006 Field Note:

Data for 2006 is not available. Estimate is based on 2005 data.

HEALTH STATUS INDICATOR MEASURE # 04B							
The rate per 100,000 of nonfatal injuries due to motor vehicle crashes	s among children age	ed 14 years and youn	iger.				
	Annual Indicator Data						
	2004	2005	2006	2007	2008		
Annual Indicator	r 23.1	23.6	23.1	21.8	21.8		
Numerator	267	272	257	241	241		
Denominator	r 1,153,514	1,153,348	1,112,945	1,107,687	1,107,687		
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied.  (Explain data in a year note. See Guidance, Appendix IX. Is the Data Provisional or Final?	i : :			Final	Provisional		

1. Section Number: Form20\_Health Status Indicator #04B

Field Name: HSI04B Row Name: Column Name: Year: 2008 Field Note:

Estimate based on 2007 data. Hospital discharge data for 2008 not yet available.

2. Section Number: Form20\_Health Status Indicator #04B Field Name: HSI04B

Field Name: HSI04B Row Name: Column Name: Year: 2007 Field Note:

Field Note:
Source: HSCRC Hospital Discharge Dataset for 2007.

3. Section Number: Form20\_Health Status Indicator #04B Field Name: HSI04B

Field Name: HSI04B Row Name: Column Name: Year: 2006 Field Note:

2006 data is not available. Estimate is based on 2005 data.

HEALTH STATUS INDICATOR MEASURE # 04C						
The rate per 100,000 of nonfatal injuries due to motor vehicle crashe	s among youth aged	15 through 24 years.				
	Annual Indicator Data					
	2004	2005	2006	2007	2008	
Annual Indicato	245.0	226.8	230.7	213.0	213.0	
Numerato	1,868	1,773	1,801	1,676	1,676	
Denominato	762,496	781,675	780,609	786,789	786,789	
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewe than 5 and therefore a 3-year moving average cannot be applied  (Explain data in a year note. See Guidance, Appendix X Is the Data Provisional or Final				Final	Provisional	

1. Section Number: Form20\_Health Status Indicator #04C

Field Name: HSI04C Row Name: Column Name: Year: 2008 Field Note:

Estimate based on 2007 data. Hospital discharge data for 2008 not yet available.

2. Section Number: Form20\_Health Status Indicator #04C Field Name: HSI04C

Field Name: HSI04C Row Name: Column Name: Year: 2007 Field Note:

Field Note:
Source: HSCRC Discharge Dataset for 2007, MDP population data for 2007.

3. Section Number: Form20\_Health Status Indicator #04C Field Name: HSI04C

Field Name: HSI040 Row Name: Column Name: Year: 2006 Field Note:

2006 data is not available. Estimate is based on 2005 data.

HEALTH STATUS INDICATOR MEASURE # 05A							
The rate per 1,000 women aged 15 through 19 years with a reported	case of chlamydia.						
	Annual Indicator Data						
	2004	2005	2006	2007	2008		
Annual Indicator	35.5	32.0	35.1	40.1	40.1		
Numerator	6,857	6,323	7,163	8,033	8,033		
Denominator	192,934	197,367	204,122	200,244	200,244		
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied (Explain data in a year note. See Guidance, Appendix IX.  Is the Data Provisional or Final?				Final	Provisional		

Field Name: HSI0 Row Name: Column Name: Year: 2007 Field Note:

Source: Maryland Division of Sexually Transmitted Diseases. Data is currently unavailable for 2007. Estimate is based on 2006 rates.

2. Section Number: Form20\_Health Status Indicator #05A Field Name: HSI05A

Field Name: HSI05A Row Name: Column Name: Year: 2006 Field Note:

Field Note:
Source: Maryland Community Health Administration, STD Program. Provisional population estimate.

HEALTH STATUS INDICATOR MEASURE # 05B							
The rate per 1,000 women aged 20 through 44 years with a reported	case of chlamydia.						
	Annual Indicator Data						
	2004	2005	2006	2007	2008		
Annual Indicator	8.5	7.8	9.8	10.7	10.7		
Numerator	8,568	7,768	9,719	10,604	10,604		
Denominator	1,005,005	996,115	987,698	990,630	990,630		
Check this box if you cannot report the numerator because 1. There are fewer than 5 events over the last year, and 2. The average number of events over the last 3 years is fewer than 5 and therefore a 3-year moving average cannot be applied (Explain data in a year note. See Guidance, Appendix IX.  Is the Data Provisional or Final?				Final	Provisional		

Section Number: Form20\_Health Status Indicator #05B Field Name: HSI05B

Field Name: HSI05 Row Name: Column Name: Year: 2007 Field Note:

Source: Maryland Division of Sexually Transmitted Diseases. Estimate is based on 2006 data since 2007 data is currently unavailable.

2. Section Number: Form20\_Health Status Indicator #05B Field Name: HSI05B

Field Name: HSI05B Row Name: Column Name: Year: 2006 Field Note:

Field Note:
Source: Maryland Community Health Administration, STD Program. Provisional population estimate.

HSI #06A - Demographics (Total Population) Infants and children aged 0 through 24 years enumerated by sub-populations of age group and race. (Demographics) For both parts A and B: Reporting Year: 2007 Is this data from a State Projection? Yes Is this data final or provisional? Final

CATEGORY TOTAL POPULATION BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	75,408	41,288	26,172	333	4,214	108	3,293	0
Children 1 through 4	295,784	169,367	96,294	1,190	15,922	534	12,477	0
Children 5 through 9	359,675	213,950	114,282	1,414	16,580	344	13,105	0
Children 10 through 14	376,820	223,535	124,887	1,327	16,215	241	10,615	0
Children 15 through 19	408,725	244,719	136,881	1,496	16,845	211	8,573	0
Children 20 through 24	378,064	229,408	122,320	1,582	17,393	294	7,067	0
Children 0 through 24	1,894,476	1,122,267	620,836	7,342	87,169	1,732	55,130	0

HSI #06B - Demographics (Total Population) Infants and children aged 0 through 24 years enumerated by sub-populations of age group and ethnicity. (Demographics)

CATEGORY TOTAL POPULATION BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Infants 0 to 1	64,622	10,786	0
Children 1 through 4	258,492	37,292	0
Children 5 through 9	328,167	31,508	0
Children 10 through 14	350,039	26,781	0
Children 15 through 19	384,073	24,652	0
Children 20 through 24	350,781	27,283	0
Children 0 through 24	1,736,174	158,302	0

HSI #07A - Demographics (Total live births) Live births to women (of all ages) enumerated by maternal age and race. (Demographics)

CATEGORY TOTAL LIVE BIRTHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Women < 15	93	25	65	0	0	0	0	3
Women 15 through 17	2,200	948	1,214	5	11	0	0	22
Women 18 through 19	4,693	2,264	2,337	14	45	0	0	33
Women 20 through 34	56,748	34,048	18,736	99	3,591	19	0	255
Women 35 or older	14,316	8,991	3,977	21	1,271	4	0	52
Women of all ages	78,050	46,276	26,329	139	4,918	23	0	365

HSI #07B - Demographics (Total live births) Live births to women (of all ages) enumerated by maternal age and ethnicity. (Demographics)

CATEGORY TOTAL LIVE BIRTHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported
Women < 15	78	15	0
Women 15 through 17	1,801	394	5
Women 18 through 19	3,953	731	9
Women 20 through 34	48,477	8,199	72
Women 35 or older	13,028	1,268	18
Women of all ages	67,337	10,607	104

HSI #08A - Demographics (Total deaths) Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and race. (Demographics) 

CATEGORY TOTAL DEATHS BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown
Infants 0 to 1	622	210	366	4	2	29	0	11
Children 1 through 4	97	45	44	1	2	4	0	1
Children 5 through 9	51	32	19	0	0	0	0	0
Children 10 through 14	74	37	33	0	0	1	0	3
Children 15 through 19	272	127	134	0	0	8	0	3
Children 20 through 24	426	206	204	1	1	11	0	3
Children 0 through 24	1,542	657	800	6	5	53	0	21

HSI #08B - Demographics (Total deaths) Deaths of Infants and children aged 0 through 24 years enumerated by age subgroup and ethnicity. (Demographics)

CATEGORY TOTAL DEATHS BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported	
Infants 0 to 1	574	40	8	
Children 1 through 4	86	11	0	
Children 5 through 9	48	3	0	
Children 10 through 14	68	6	0	
Children 15 through 19	261	10	1	
Children 20 through 24	408	17	1	
Children 0 through 24	1,445	87	10	

**HSI #09A - Demographics (Miscellaneous Data)** Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by race. (Demographics)

Is this data final or provisional? Final

CATEGORY Miscellaneous Data BY RACE	Total All Races	White	Black or African American	American Indian or Native Alaskan	Asian	Native Hawaiian or Other Pacific Islander	More than one race reported	Other and Unknown	Specific Reporting Year
All children 0 through 19	1,506,879	884,278	494,605	5,874	71,388	1,490	49,244	0	2008
Percent in household headed by single parent	33.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2007
Percent in TANF (Grant) families	15.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	2007
Number enrolled in Medicaid	359,039	104,527	220,464	675	9,534	183	0	23,656	2008
Number enrolled in SCHIP	120,906	43,874	64,348	240	5,914	75	0	6,455	2008
Number living in foster home care	9,074	0	0	0	0	0	0	9,074	2008
Number enrolled in food stamp program	145,358	0	0	0	0	0	0	145,358	2008
Number enrolled in WIC	106,332	46,473	52,575	0	0	0	0	7,284	2008
Rate (per 100,000) of juvenile crime arrests	3,716.2	2,556.6	6,204.2	371.5	303.2	0.0	0.0	0.0	2006
Percentage of high school drop- outs (grade 9 through 12)	3.4	2.6	4.5	5.0	1.2	0.0	0.0	0.0	2008

**HSI #09B - Demographics (Miscellaneous Data)** Infants and children aged 0 through 19 years in miscellaneous situations or enrolled in various State programs enumerated by ethnicity. (Demographics)

CATEGORY Miscellaneous Data BY HISPANIC ETHNICITY	Total NOT Hispanic or Latino	Total Hispanic or Latino	Ethnicity Not Reported	Specific Reporting Year
All children 0 through 19	1,369,254	137,625	0	2008
Percent in household headed by single parent	0.0	0.0	33.0	2007
Percent in TANF (Grant) families	0.0	0.0	15.0	2007
Number enrolled in Medicaid	359,039	52,484	0	2008
Number enrolled in SCHIP	120,906	29,649	0	2008
Number living in foster home care	0	0	9,074	2008
Number enrolled in food stamp program	0	0	145,358	2008
Number enrolled in WIC	77,137	29,195	123,868	2008
Rate (per 100,000) of juvenile crime arrests	0.0	0.0	3,716.2	2006
Percentage of high school drop-outs (grade 9 through 12)	13.3	4.6	0.0	2008

HSI #10 - Demographics (Geographic Living Area) Geographic living area for all resident children aged 0 through 19 years old. (Demographics)

Reporting Year: 2008	Is this data from a State Projection? Yes	Is this data final or provisional? Final

GEOGRAPHIC LIVING AREAS	TOTAL	
Living in metropolitan areas	893,400	
Living in urban areas	176,672	
Living in rural areas	436,807	
Living in frontier areas	0	
Total - all children 0 through 19	613,479	

Note:

The Total will be determined by adding reported numbers for urban, rural and frontier areas.

### FORM 21 HEALTH STATUS INDICATORS DEMOGRAPHIC DATA STATE: MD

HSI #11 - Demographics (Poverty Levels) Percent of the State population at various levels of the federal poverty level. (Demographics)

Reporting Year: 2007 Is this data from a State Projection? No Is this data final or provisional? Final

POVERTY LEVELS	TOTAL	
Total Population	5,456,359.0	
Percent Below: 50% of poverty	3.9	
100% of poverty	8.2	
200% of poverty		

### FORM 21 HEALTH STATUS INDICATORS DEMOGRAPHIC DATA STATE: MD

HSI #12 - Demographics (Poverty Levels) Percent of the State population aged 0 through 19 at various levels of the federal poverty level. (Demographics) Reporting Year: 2007 Is this data from a State Projection? No Is this data final or provisional? Final

POVERTY LEVELS	TOTAL
Children 0 through 19 years old	1,342,351.0
Percent Below: 50% of poverty	0.0
100% of poverty	10.4
200% of poverty	0.0

#### FORM NOTES FOR FORM 21

Data Source: MDP Population data for 2008. Grouped according to jurisdicational classification by the Annotated Code of Maryland.

#### FIELD LEVEL NOTES

 Section Number: Form21\_Indicator 09A Field Name: HSIRace\_SingleParentPercent

Row Name: Percent in household headed by single parent

Column Name: Year: 2010 Field Note:

Please Note: The percentage of children in single-parent families is unavailable by race/ethnicity.

The total number of children in single-parent families= 424,000.

Data Source: The Anne E. Casey Foundation, 2007.

Section Number: Form21\_Indicator 09A
 Field Name: HSIRace\_TANFPercent
 Row Name: Percent in TANF (Grant) families

Column Name: Year: 2010 Field Note:

Please Note: The percentage of families in TANF is unavailable by race/ethnicity.

The total number of families in TANF= 11,186.

Data Source: Center for Law and Social Policy, 2007.

 Section Number: Form21\_Indicator 09A Field Name: HSIRace\_MedicaidNo Row Name: Number enrolled in Medicaid

Column Name: Year: 2010 Field Note:

Source: Medicaid data for Federal Fiscal Year 2008.

Section Number: Form21\_Indicator 09A Field Name: HSIRace\_SCHIPNo Row Name: Number enrolled in SCHIP

Column Name: Year: 2010 Field Note:

Source: Medicaid data for Federal Fiscal Year 2008.

Section Number: Form21\_Indicator 09A
 Field Name: HSIRace\_FoodStampNo

Row Name: Number enrolled in food stamp program

Column Name: Year: 2010 Field Note:

The total number of children enrolled in food stamp program= 145,358.

Please Note: The number of children enrolled in food stamp program is unavailable by race/ethnicity.

Percent of eligible persons who receive food stamps= 55%

Data Source: Children's Defense, 2008.

Section Number: Form21\_Indicator 09A
Field Name: HSIRace\_WICNo
Row Name: Number enrolled in WIC

Column Name: Year: 2010 Field Note:

This number includes both women and children. The total number of women and children receiving WIC (Supplemental Nutrition Program for Women, Infants, and Children) = 123.868.

Data Source: Children's Defense, 2008.

 Section Number: Form21\_Indicator 09A Field Name: HSIRace DropOutPercent

Row Name: Percentage of high school drop-outs (grade 9 through 12)

Column Name: Year: 2010 Field Note:

Please Note: The percentage of Native Hawaiian or other Pacific Islander high school dropouts is unavailable.

Data Source: Maryland State Department of Education (MSDE), 2008.

Section Number: Form21\_Indicator 09B
 Field Name: HSIEthnicity\_SingleParentPercent

Row Name: Percent in household headed by single parent

Column Name: Year: 2010 Field Note:

Please Note: The percentage of children in single-parent families is unavailable by race/ethnicity.

The total number of children in single-parent families= 424,000.

Data Source: The Anne E. Casey Foundation, 2007

9. Section Number: Form21\_Indicator 09B

Field Name: HSIEthnicity\_TANFPercent Row Name: Percent in TANF (Grant) families

Column Name: Year: 2010 Field Note:

Please Note: The percentage of families in TANF is unavailable by race/ethnicity.

The total number of families in TANF= 11,186.

Data Source: Center for Law and Social Policy, 2007.

10. Section Number: Form21\_Indicator 09B Field Name: HSIEthnicity\_MedicaidNo Row Name: Number enrolled in Medicaid

Column Name: Year: 2010 Field Note:

Source: Medicaid data for Federal Fiscal Year 2008.

11. Section Number: Form21\_Indicator 09B Field Name: HSIEthnicity\_SCHIPNo Row Name: Number enrolled in SCHIP

Column Name: Year: 2010 Field Note:

Source: Medicaid data for Federal Fiscal Year 2008.

12. Section Number: Form21\_Indicator 09B Field Name: HSIEthnicity\_FoodStampNo

Row Name: Number enrolled in food stamp program

Column Name: Year: 2010 Field Note:

Please Note: The number of children enrolled in food stamp program is unavailable by race/ethnicity.

Percent of eligible persons who receive food stamps= 55%

Data Source: Children's Defense, 2008.

13. Section Number: Form21\_Indicator 09B Field Name: HSIEthnicity\_WICNo Row Name: Number enrolled in WIC

> Column Name: Year: 2010 Field Note:

This number includes both women and children. The total number of women and children receiving WIC (Supplemental Nutrition Program for Women, Infants, and Children)

= 123,868.

Data Source: Children's Defense, 2008.

14. Section Number: Form21\_Indicator 11

Field Name: S11\_total Row Name: Total Population

Column Name: Year: 2010 Field Note:

Data Source: U.S. Census Bureau, 2005-2007 American Community Survey: 3 year estimate

15. Section Number: Form21\_Indicator 11

Field Name: S11\_50percent

Row Name: Percent Below: 50% of poverty

Column Name: Year: 2010 Field Note:

Data Source: U.S. Census Bureau, 2005-2007 American Community Survey: 3 year estimate

16. Section Number: Form21\_Indicator 11

Field Name: S11\_100percent Row Name: 100% of poverty

Column Name: Year: 2010 Field Note:

Data Source: U.S. Census Bureau, 2005-2007 American Community Survey: 3 year estimate

17. Section Number: Form21\_Indicator 11

Field Name: S11\_200percent Row Name: 200% of poverty

Column Name: Year: 2010 Field Note:

Data Source: U.S. Census Bureau, 2005-2007 American Community Survey: 3 year estimate

18. Section Number: Form21\_Indicator 12

Field Name: S12\_Children

Row Name: Children 0 through 19 years old

Column Name: Year: 2010 Field Note:

Data Source: U.S. Census Bureau, 2005-2007 American Community Survey: 3 year estimate.

Note that data is for children <18 years

19. Section Number: Form21\_Indicator 12

Field Name: S12\_50percent

Row Name: Percent Below: 50% of poverty

Column Name:

Year: 2010 Field Note:

unable to find this data for children in Maryland

20. Section Number: Form21\_Indicator 12 Field Name: S12\_100percent Row Name: 100% of poverty

Column Name: Year: 2010 Field Note:

Data Source: U.S. Census Bureau, 2005-2007 American Community Survey: 3 year estimate

Note that this is for children <18 years 21. Section Number: Form21\_Indicator 12 Field Name: S12\_200percent Row Name: 200% of poverty

Column Name:
Year: 2010
Field Note:
unable to locate this information for children in Maryland